



MANUAL
FOR
MAGNETIZING,
WITH THE
ROTARY AND VIBRATING
MAGNETIC MACHINE,
IN THE
Duodynamic Treatment of Diseases

NINTH EDITION, ENLARGED.
AND REVISED.

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PREFACE

It may be useful and interesting to the readers of this little manual, to receive in it a concise history of the rise and progress of the Magnetic practice in diseases, both as it regards the discovery of the new symptoms which we have demonstrated, and the appropriate treatment which we have consequently pursued. Such an history will at least convey some idea of the time and labor required to resist the authority of established systems of error, and check their career of mischief, even when the clearest truth is brought to oppose the most manifest absurdities.

It is now thirty-four years since we first discovered the Magnetic symptoms of tubercular disease of the organs and muscles, on which we founded a magnetic treatment of a large class of chronic diseases. These symp-

toms are very simple, invariable, easily understood, and practised with facility and certainty, without asking a question, or having the least previous knowledge of the cases.

The treatment thereupon adopted, was, from the first, successful; and has consequently abounded with evidences of its propriety so conclusive and forcible, that no disinterested physician could evade them in conscience, or neglect them in practice, without incurring the reproach of all who had candidly examined them. Notwithstanding the notoriety of these practical proofs, and the circulation of more than 20,000 copies of various works which we have written upon the subject; and notwithstanding the advancement of medical and philosophical science in Europe is daily and hourly contributing an almost meridian splendor in illustration and estimation of these important aids to the cause of our common humanity,—yet the professors of our Medical Colleges and Schools, prizing the *verde antique* of their very errors and barbarisms, above all the dawning intelligence of an age so fertile in universal improvement, continue to teach the uncertain, exploded, and ever varying *astrological* symptoms of this class of diseases, with all the complacency of tranquil ignorance and irresponsible authority.

In this Manual the profession and the public are furnished with further, and the most incontrovertible evidence of the truth and value of the principles and practice which we have so long adopted. This additional evidence has been developed in the use of the New Magnetic Machine in a great number and variety of cases.

The extraordinary rapidity with which this instrument is conquering the prejudices and captivating the convictions of the most truly learned, and intellectual members of the profession, seems to warrant the triumphant conclusion, that it will ultimately effect a complete revolution in the practice of medicine and surgery.

The magnetic symptoms to which we have alluded, make a natural division of diseases, into four classes, viz :—

I. Acute diseases of the serous surfaces of the body, including the skin.

II. Chronic disease of the serous surfaces.

III. Acute disease of the mucous surfaces of the body, including the alimentary canal.

IV. Chronic disease of the mucous surfaces.

The action of the rotary magnetic machine on these different surfaces, confirms the correctness of this classification, which simplifies the practice of physic and surgery in the most extraordinary manner, and elevates the study and practice of medicine from a very uncertain, and consequently ever-changing art, to the character, dignity and rank of a science.

In addition to magnepathy or the magnetic practice of medicine, we have added to this little work a very full synopsis of the homœopathic practice from the best authors, and also a very full synopsis of the old alopathy practice from the best writers of the last year or 1846, from which the practice of the different systems can be seen and compared with great facility, and either one adopted, or each in succession; or they may be combined as circumstances may require.

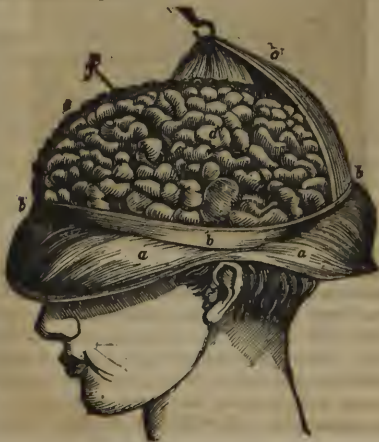
CHAPTER I.

Magnetic Organization of the Human System.

It has been truly said, that "life itself, is only known to us empirically. We acquire a knowledge of disease in the same way; and the same method is adopted in the cure;" and it may be doubted whether we shall advance much in a scientific knowledge of diseases, or of the remedies for them, until we first obtain a scientific knowledge of the organization which constitutes animal life. We have a very accurate knowledge of the anatomical or animal organization, but none whatever of the invisible motive powers which constitute animal life. Few, very few physicians ever had any conception of even the existence of such an organization—yet there cannot be motive power without it. We can see the ropes, the levers, and the pulleys, by which motion is produced, but nothing of the spiritual, sympathetic, and invisible forms that use them for the purposes of motion—yet it is on these forms, in the different organs and other structures, that the immaterial or spiritual powers of medicines act; and it was the obvious importance of a knowledge of these forms that induced us, many years since to commence an investigation of this subject.

which has at last resulted in a development of their organization.

We commenced with the brain, and traced by the direction of its fibres, an organization representing five magnetic poles; two in the organs of causality, two in the organs of amateness, and a very large one in the centre of the brain, requiring at least two magnetic axis, which must cross each other in the centre of that organ



When the heart is laid open and distended in a circular manner (*d d*, walls of the heart; *e e*, septum or division between the auricles and ventricles; *f f*, pericardium,) as seen in this figure, it is found by the manner in which



it is constructed to have four large poles in its circumference; *a a*, and *c c*, the axes of which cross each other in the centre pole of the heart, like those of the circumference of the brain. The forces from the poles, *a a*, radiate along the ligaments or braces, called *calumna cornea*, to the sides of the ventricles; *b b*, and the forces also radiate from the poles in the

auricles *c c*, along their ligaments, as seen in the figure: all of which are first expanded and then contracted in the motions of the heart, by the action of the forces from the poles.

The number and situation of these poles are, from this view of the construction of the heart, so self-evident as to preclude the necessity of a solitary remark; but it may be asked if the motions of the heart are produced by the action of these poles upon its muscles, from whence are the forces derived which sustain these poles? *

The answer is, from the serous and mucous surfaces of the body, which are maintained in negative and positive state, for such purposes—the serous, including the skin supplying the positive, and the mucous, including the alimentary canal, the negative force, which are conducted to the poles in the organs through the nerves in these surfaces—the negative poles attracting the positive force, and the positive poles the negative.

It is a matter of common observation that magnetic poles of the same denomination repel, and those of opposite denominations attract each other; and in order to ascertain the

* Magnetic poles cannot be long maintained, any where, without a constant supply of these forces from some source.

degree of force with which they repel and attract, it is found by experiments, conducted on the most rigid principles of inductive philosophy, that they repel and attract each other with a force proportioned to the quantity of these forces in given spaces, or the spaces they occupy. It is also ascertained, in the same manner, that when they repel, they expand, as seen in the case of iron filings attached to poles of the same denomination.

And when they attract, they contract, as seen in the case of iron filings attached to poles of opposite denominations, with a force proportioned to their quantities in the spaces they occupy. The two poles, then, of the same denomination in the opposite hemispheres of the brain may, through the spinal nerves attached to these hemispheres, expand one set of muscles on one side of the body, limb, or organ, at the same time that those of the opposite denomination contract the antagonist muscles on the other; for the muscles, like the organs and nerves, are necessarily double, for the purpose of producing motion by their simultaneous action.

They may also expand one set of muscles by the repulsive, and contract their antagonists by the attractive force, in the same way that one metallic wire is expanded with the repulsive, and another contracted with the attractive

force. Thus when, by the mere exercise of an inclination, excited by a sensation, we incline to expand one set of muscles to extend a limb, we incline to contract their fellows at the same time; so that when one muscle expands its fellow necessarily contracts; and when another contracts its fellow expands.

These motions called attracting and repelling are, in other words, the pushing and pulling motions; and if motion is produced in man and other animals by the action of these forces, we ought to be able to recognise the same motions in the fluids of the body, whether æriform or aqueous, and also in the organs by which they are moved.

On a minute examination of this subject, we find that in the formation of the organs, the same order is observed in the distribution of the membranous surfaces as in the formation of the external and internal surfaces of the body. The brain, heart, lungs, stomach, intestines, liver, spleen, kidneys, uterus, and cystis, are all covered with a serous membrane, and their inner surfaces are lined with a mucous membrane. On observing the action of the air and of the lungs in breathing, we instantly recognise those motions.

In reflecting on the great power which it was necessary to give to the heart, it was easy to see that the diagram or plan for its construc-

tion must conform to that necessity. This consideration, however, presented no difficulties; for the sources from which it might derive the necessary strength and durability, under the action of these forces, were abundant, and we accordingly find its strong muscles supported by braces and surrounded by additional membranes, presenting extensive surfaces for the accumulation of these forces.

On an attentive examination of the action of this organ, and of the motion of the blood in the arteries, we again recognised these motions in both, in the clearest manner.

The heart is constructed and acts on the principle of the pump; the fluids being attracted through the veins and other absorbent vessels in steady streams to the heart, with an intensity of force equal to that with which the ventricles repel them through the arteries.

Every repulsion of a fluid, in elastic bodies, produces expansions, and every attraction is succeeded by contractions of these bodies, according to a law of these forces, viz : repulsions expand, and attractions contract with powers proportioned to their quantities in given spaces.

Every repulsion of the heart repels or pushes the fluids in the arteries, and every attraction pulls the fluids in the absorbent vessels.

The motions of the pulse correspond exactly with these laws and these motions; for every repulsion is succeeded by an expansion in the artery, and every attraction by a contraction of it. The same phenomenon is found in the nose of the fire engine when in motion. The water moves in the hose from the cistern or hydrant in a steady stream to the engine, and from the engine through the hose with the motions of the pulse.

Sensations and inclinations, like repulsions and expansions, and attractions and contractions, are attributes of these forces. The inclinations belong to the sensations, whether repulsive or attractive, as the expansions do to the repulsions, and the contractions to the attractions, and follow them in the same order.

These spiritual, or male and female forces, are innate in every kind of matter, without possessing any character in common with it, whether it be ponderable or imponderable; and in their organized or magnetized state. they were the foundations on which matter was laid, in the formation of the solar system, and of the mineral, vegetable, and animal kingdoms. Repulsions, expansions, attractions, contractions, sensations, inclinations, *sympathetic* action, motion, and form, are then, in this order, the attributes of these

forces, by which that system and these kingdoms were formed with a precision, and adorned with a beauty, that defy imitation.

Nothing can therefore equal the adaptation of these forces to produce such results; for besides their unlimited power, which can make a world tremble like a leaf, the great velocity of their motions and their almost inconceivable tenuity, enable them to penetrate the most minute orifices, and construct an infinite variety of bodies of every form and size, and produce motion in the smallest structures with the same geometrical accuracy as in the largest.

These views of duodynamics, or moving powers in animate and inanimate matter, may at first appear very strange and unaccountable even to men of science who have little or no knowledge of this subject, and I may therefore direct their attention to another example of the repelling and expanding and attracting and contracting powers of those forces, in illustration of these views, and which may be seen and tested in the most satisfactory manner in the recently discovered process of gilding metals by the action of these forces in solutions of gold.

I may also direct the attention of physicians and surgeons to the experiments of Doctors Laroche and Crusell, of St. Petersburg, pub-

lished in the Dissector, in which cataracts were formed in the eye with the attractive and contractive force, and were afterwards dispelled, in two minutes, with the repulsive and expansive force, and which cannot fail to suggest to them not only the great importance of a knowledge of the magnetic organization of the human system, but also of the magnetic character of their remedies for diseases.

The following is a diagram of the magnetic organization of the organs of the human body, as traced by the rotary magnetic machine :

A A,—Poles in the organs of causality
a a,—Poles in the organs of amativeness, Arbor vitæ. *b*,—Cervical glands. *c c*,—Lungs.
d d,—Mammæ, or breasts, and heart. *e*,—Stomach. *f*,—Spleen. *g*,—Liver. *h h*,—Kidneys. *i i*,—Ovaria. *j*,—Uterus. *m*,—Cystis.
n,—Arbor vitæ. *a n*,—Axis between these poles.

The importance of a knowledge of the magnetic organization of the human system, is greatly increased by the introduction of the Rotary Magnetic Machine into practice, as it is on that organization which the instrument acts. In magnetizing the organs, it is necessary, in most cases, to place one of the buttons on the posterior spinal nerves connected with them, while the other is moved over the or-



gans. In some cases, however, one button should be placed directly over one pole of an organ, while the other is over the spinal nerve connected with it. There are other cases, in which one button should be placed over the pole of one organ, and the other over the pole of another organ; and again, there are cases in which one button should be placed over one pole of one organ, and the other over an organ of the brain. There are also many cases in which the buttons must be placed over different phrenological organs, and hence the necessity of a knowledge of their relative situations.

We have traced these poles through the spinal nerves, under a very moderate power of the instrument, and also direct magnetic axis, between poles of the same and of different and distant organs, as seen in the above figure; which accounts for the direct sympathies that are known to exist between distant organs, in the most satisfactory manner. The direct magnetic connexion between the stomach and spleen, and the spleen and left kidney, accounts also for the introduction of some fluid into the kidneys, through a medium other than that of a general circulation.

There are other large poles in the abdomen, besides those represented in the above figure — there are two in the solar plexuses, and two

in the mesentery, surrounded with satellites. There are also two poles in each joint, including those of the spinal column*, with axes connecting *antagonist* muscles, a knowledge of which, and of these muscles, is indispensable to a scientific and successful application of the buttons, in magnetizing for lateral, anterior, and posterior curvatures of the spine, acute and chronic rheumatism, paralysis, &c.

DUODYNAMICS.

The symptoms we have introduced to distinguish chronic tubercula or chronic disease of the serous surfaces, are always present in acute diseases of these surfaces, and depend entirely upon the action of two forces, or upon the duodynamic or moving powers of the system. They are founded upon the fact that these forces act in unison in health, but are interrupted in disease—the signs of which are distinguished with facility and certainty, without any previous knowledge of the case.

The absence of these symptoms, and the presence of disease in the organs, limbs, or other structures, determine, with the same facility and certainty, disease of the mucous surfaces, acute or chronic.

The duodynamic treatment we have introduced, is founded on the fact that motion is interrupted or lost in some part of the body,

* There is also a large pole in the middle of the palm of each hand, and a larger one in the bottom and hollow of each foot.

organs, or limbs, and cures the disease in restoring the interrupted or lost motions, by the action of two forces, emanating from different kinds of matter, and acting on the same, or different surfaces of the body, organs, or limbs. These symptoms are prominent and uniform in their character, and reduce and bind down the classification of diseases to the narrow limits of *acute* and *chronic* diseases of the *serous*, and of the *mucous* surfaces, or to four classes, orders, genera, and species, and the duodynamic treatment of diseases which we long since adopted, supports and sustains this classification in the most steady and successful manner, and presents a strong contrast with the old never ending classification and ever varying symptoms and treatment.

The posterior spinal nerves are connected with and terminate in the serous membranes or serous surfaces of the body, organs, and limbs, including those of the skin and fasciæ of the muscles, &c., and are the media of sensation; while the anterior motor nerves are connected with and terminate in the mucous membranes, or mucous surfaces, including those of the fasciæ of the muscles, the bronchia and the alimentary canal, and are the media, only, of the forces which produce motion.

These different arrangements of the nerves

of motion and those of sensation, account for the absence of the magnetic symptoms in disease of the mucous surfaces. Insensibility in these surfaces is as necessary to the maintenance of animal life, as sensibility is in the serous surfaces. The most intense inflammations of the mucous surfaces produce no pain. There is never any pain in these cases without an extension of the disease to the serous surfaces; yet our modern medical writers continue to repeat the tales of their grandfathers about the great and wonderful sensibility of the mucous surfaces.

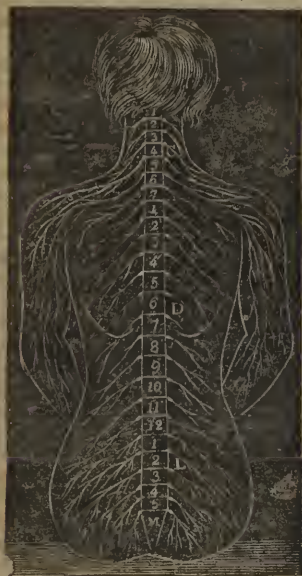
Acute or inflammatory diseases, run through their course in a few days, or a few weeks; while chronic diseases continue not only many months, but many years. The excitement of the system in the first is exalted and continuous, or has brief remission or intermissions, while in the last it is depressed and periodical or accidental, with long periods of repose of many weeks or months, and is consequently as different as darkness is from light; yet the modern astrologers of the schools, like their ancient masters who were priests, physicians and astronomers, class them all as inflammations of different degrees, and treat them as such. Our modern astrologers also follow their ancient masters in pretending to distinguish these diseases by feeling the pulse, the

aspects of the tongue and urine, and the color and odor of the stools, &c.

There is however nothing more uncertain than these signs or symptoms, unless it is the treatment founded upon them, as is well known to our faculty: yet they are taught as a science with all the gravity due to these subjects, involving life or death. On the contrary there is nothing more certain, than the magnetic symptoms, or the duodynamic treatment founded on them, in the absence of accidents not under the control of the physician; yet such is the attachment of men to old systems—the old astrological symptoms and treatment will continue to be taught by the professors in our medical colleges as long as they are of any value in their market.

Acute and chronic tubercula, or inflammatory, and chronic diseases of the serous membranes, or serous surfaces of the body, organs or limbs; including the skin and fascia of the muscles, is easily and *invariably* distinguished by pain more or less severe (in proportion to the intensity of the disease) produced by pressure on the ganglions of the spinal nerves, in the intervertebral spaces along each side of the spine without any previous knowledge of the case—no matter what name may have been given to the disease by physicians, nosologists, or other medical writers

**Ganglions of the spinal nerves in
the intervertebral spaces.**



There are 7 cervical vertebrae, C ; 12 dorsal, D ; and 5 lumbar, L ; these vertebrae with the os-oxyn, m ; constitute the spinal column

Press on the *sides* of the 1, cervical vertebræ to find symptoms of tubercula of the head—of the brain, throat, nose, eyes, or ears.

Press on the *sides* of the 2, 3, 4, 5, 6 and 7 cervical to find tubercula of the muscles, (Rheumatism) or of the vertebræ, or of the joints of the limbs—white swellings, &c.

Press on the sides of the intervertebral space between the 7 cervical, and 1 dorsal, to find tubercula of the lungs, and

Press on the left side of the same space to find tubercula of the heart.

Press on the space between the 1 and 2 dorsal vertebræ to find tubercula of the stomach.

Press on the space between the 2 and 3 dorsal to find tubercula of the duodenum.

Press on the right side of the space between the 7 and 8 dorsal to find tubercula of the liver.

Press on the spaces between the 11 and 12 dorsal to find tubercula of the small intestines.

Press on the spaces between the 12 dorsal and first lumbar to find tubercula of the kidneys.

Press on the spaces between the 1 and 4 lumbar to find tubercula of the uterus.

Press on the spaces between the 4 lumbar and os-coccyx to find tubercula of the ovaria, prostrate gland, vesicular seminales, and testes.

Press on the spaces between the 4 lumbar and os-coccyx, to find tubercula of vagina, &c.

We always press with the thumb of the right hand on the intervertebral spaces of the left side of the spine, and with that of the left hand on the intervertebral spaces of the right side.*

These directions will enable any person of common sense to distinguish tubercular disease with facility and certainty, without the aid of a physician. Negative matter, as the acids and the metals should be the principal ingredients in the preparations of medicine for disease of the serous surfaces, and should be used in connection with the action of the rotary magnetic machine.

DISEASES OF THE MUCOUS SURFACES.

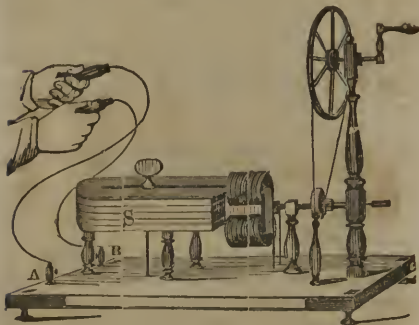
ACUTE and CHRONIC diseases of the mucous surfaces are invariably distinguished by the presence of disease of the body, organs or limbs, and the absence of the magnetic symptoms; and require for their reduction a treatment entirely different from that of tubercular disease of the serous surfaces. Positive matter, as the alkalies and the gums, should be the chief ingredients in the preparations of medicine for diseases of the mucous surfaces, and should be used in connection with the action of the rotary magnetic machine.

* The professors in our medical institutions have commenced teaching these symptoms.

CHAPTER II.

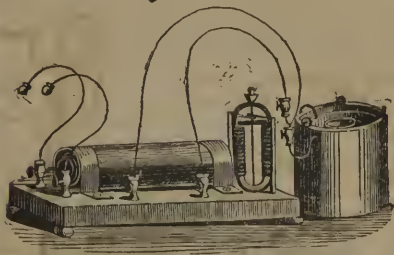
ROTARY MAGNETIC MACHINES.

We commenced magnetizing with a rotary magnetic machine in December, 1843. It was worked by hand, and is constructed in the manner represented in the following figure



When the wheel is turned, the armature of soft iron, wound with copper wire, strikes the poles of the magnet S, which elicits shocks and sparks of fire, while brass cylinders, connected (A B,) with the armature and poles of the magnet, by copper wires, are held in the

hands, to receive the shocks. The machine is one of great power, but it required a man constantly at the wheel, without the means of regulating its power with exactness, and we consequently obtained another kind of Rotary Magnetic Machine represented in the following figure—



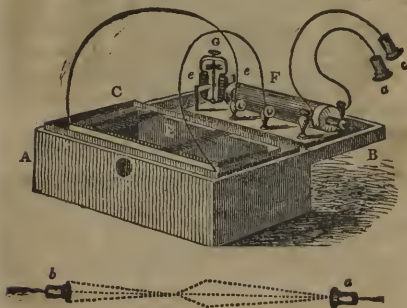
which is run by a magnetic battery, and its power easily regulated.

The length of the machine, including the battery, is 16 inches, its width 4, height 5 inches, and the weight of the whole, the case and buttons, for magnetizing, about eight pounds.

The extraordinary results which we obtained in magnetizing with the machine constructed in this manner, induced many persons to

purchase it; but its size and weight, together with its liability to get out of order, conjoined with the complaints frequently made of difficulty in running it, gave us great inquietude. We consequently determined to obviate these objections if possible, and have at last, by employing a jeweller extensively known in the Union, as having no superior in this city, to make the machine under our direction, succeeded in our object. It has a new and convenient arrangement, as represented in the following engraving, and to distinguish it from other machines we have named it the

SAVAGE ROTARY MAGNETIC MACHINE.



The Savage Rotary Magnetic Machines are

of different sizes, and are fitted into neat mahogany cases, including the battery. The case of the first size is ten inches long, five wide, and three deep. The second size is eight inches long, four wide, and three deep. The third size is seven inches long, three wide, and two and a half deep. The fourth size is six inches and a half long, three wide, and one and a half deep. The instruments are set on the covers in magnetizing, as seen in the figure, and are made in a very superior style; are jewelled and run in the best manner.

A, case; B, the cover; C, sheet copper vessel; E, sheet copper, the lower edge of which is soldered on the bottom of the copper vessel C; D, copper piece connected with the zinc between the copper surfaces, containing a solution of sulphate of copper; F, cylinder of copper wire; G, magnet and armature; *e, e*, conductors to the armature: *c*, negative, and *a*, positive button for magnetizing.

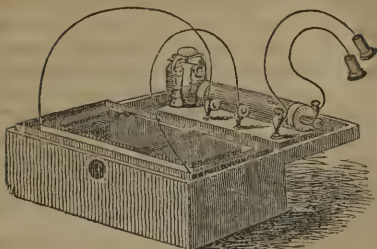
The solution of sulphate of copper (blue vitriol) in which the zinc is suspended, is slowly decomposed by the action of the zinc and copper surfaces upon it, when the free sulphuric acid attacks the zinc and forms a sulphate of zinc. While these changes are in progress two forces are evolved,—one from the copper, which is the negative, and the

other from the zinc, which is the positive force. The negative force is conducted along the wire connected with the copper vessel, and the positive force is conducted along the wire connected with the zinc between A C. The negative force passes directly into the cylinder of copper wire, and the positive directly to the armature, when it moves on its axis by the action of these forces—one of which—the negative which repels, moves from the battery, and the positive which attracts, moves to it.

The positive button *a*, it should be remembered, is always on the right, and the negative *c*, on the left hand, as we stand fronting *these* machines. It should also be remembered that the negative force, or that from the negative button *c*, is 30 or 40 per cent stronger than that from the positive button *a*.

The power of the instrument is regulated by moving the piston in the cylinder. It increases from its minimum to its maximum, with the distance of the piston in the cylinder

VIBRATING MAGNETIC MACHINE.



Practice has shown that the silver conductors to the armature of the Savage Rotary Magnetic Machine will wear off in five or six months, if the machine be kept in constant motion every day, in consequence of the great velocity of the armature: when it becomes necessary to replace them, and as a goldsmith or other mechanic may not always be at hand for that purpose, we have directed our attention to the construction of a less complicated movement, and have succeeded in our object. We have substituted a spring, as seen in the above figure, which vibrates so fast as to make the motion of the forces continuous. The power of the instruments is also greatly increased, and, with the continuous motions of the forces, makes them greatly

superior to the rotaries, or any other instruments for magnetizing. We have also made other important improvements connected with these machines, in which no expense has been spared to render them everything that could be desired for the purpose for which they are intended.

The construction of these machines is so simple as to make any instructions for running them apparently unnecessary. We may, however, observe, that the solution of sulphate of copper, with which the instrument is run, should be a saturated solution, or as strong as it can be made, and should be poured into and nearly fill the space surrounding the zinc; when, on adjusting the conducting wires from the battery to the instrument, as seen in the above engraving, the armature or spring will commence vibrating, if the screw presses moderately upon it.

If the pressure, however, is very strong, strike the spring downwards with the end of the finger, when it will vibrate, unless the screw presses too hard.

A very little attention to the effect of the screw upon the action of the spring, will enable any person to understand it, and to see that the intensity of the forces from the machines may be varied by the screw, as well as by the piston.

When we have finished magnetizing a patient, the zinc is raised from the solution, and set on a copper projection made for that purpose, to prevent the farther action of the fluid upon it. The fluid may remain in the copper, as it does not act upon it.

There should constantly remain in the solution undissolved blue vitriol, to insure its steady maximum strength, as it only dissolves as fast as the solution becomes weak by the action of the zinc upon it.

When the zinc becomes thickly coated with sediment, it should be scraped off with a case-knife; and when the instrument is run constantly every day, the solution should be poured out of the copper into a pitcher, and the sediment washed out of the copper once a week. The old solution should then be poured into the copper, and blue vitriol and water added, if necessary, to increase the strength and quality of the fluid.

The power of the instruments is so great, as to make it necessary to observe the greatest caution in regulating their power to the weakest standard, before the buttons are applied to the head or stomach of any person. The power may then be gradually increased to a degree that can be easily borne, by moving the piston.

There are regular degrees of susceptibility to the influence of the forces from magnetic

machines, like those from the clairmatiser or mesmeriser. There are some persons who are so susceptible to the influence of the forces from the instruments, as to make it necessary to remove the piston, and to use the then almost inappreciable forces with the greatest caution; especially in magnetizing the brain. In these cases the positive button should be held upon the neck by a third person, or held in the left hand of the patient, while the magnetizer takes the negative in his left hand, and makes passes with his right hand over the forehead. Such patients bear with ease a much greater power when magnetized in this manner, and we frequently magnetize the other organs, as well as the limbs, in this way, or by placing the positive button over the ganglion of the spinal nerve, and having it held there, while passes are made with the right hand over the diseased organ or limb. Little children are also magnetized in this manner with great facility, and the effect is at the same time more soothing and salutary.

The vibrating machines will be found greatly superior to the shocking machines for magnetizing in this manner, as well as every other; for the influence of the forces from these machines is much more salutary, and there is a great saving of time in magnetizing.

A very simple improvement is made in the batteries of these machines, especially for office use. It consists in making a round hole of about a quarter of an inch in diameter, through each side of the inner copper dish in which the instrument is packed. The sulphate of copper (blue vitriol) is then thrown into the dish, and water poured on to it, and when the water becomes fully saturated, the remaining sulphate of copper will dissolve slowly, or only as fast as the solution becomes weakened by its action upon the zinc. The strength of the solution is kept up very steadily in this way, as long as there is undissolved sulphate in the dish, and operates like a sustaining battery

In magnetizing, the wires sometimes break near their connections with the buttons, and also near their connections with the machine, when the ends of the wires must be unwound, and then fastened as before, so that the bare wires will be in contact with the metals to which they are attached.

The hole which connects the wire with the zinc sometimes becomes thickly coated with sediment, which must be removed, so that the metals may come in contact.

It has heretofore been the great object of those who have before planned or construct-

ed Magnetic Machines, to make them in a manner to obtain the greatest or most severe shocks, and for this purpose, large machines or instruments were supposed to be necessary, and those ideas were very natural, especially in those having large organs of marvellousness. They proceeded upon the erroneous principle "that the greater the machine the greater the power," or that the power increases *pari-passu* with the size of the machines, whereas the reverse of this proposition is true; for the power of these instruments increases as their size decreases—other things being equal, as is seen on a comparison of the old machines with the Savage instruments. The motions of the forces from the latter are continuous and agreeable, and produce the most violent action of the muscles and of the poles of the organs, without the severe and painful shocks of the former, which are more or less injurious, and always very unpleasant to adults, and are borne with great difficulty by children.

The figure drawn below the engraving* is intended to represent the direction of the forces as they proceed from the buttons in magnetizing—*a*, the negative button, repels and

* Page 28.

expands, while the positive button *b*, attracts and contracts. Besides the negative force exerts an alkaline, and the positive an acid influence upon the fluids and solids of the body, and hence the importance of a scientific application of the buttons in diseases of the different membranes, or of the serous and mucous surfaces.

The form of the buttons for magnetizing, and the different kinds of metals of which they are made, is a matter of some importance. Brass cylinders were connected with the machine, and held in the hands to show the power of the instrument, before we applied the buttons seen in the figure. It was then a mere toy, but is now an important and indispensable instrument in the treatment of diseases. Besides these buttons, we have found other forms very useful in magnetizing the eye, and in some cases of disease of the uterus, urethra, &c., and these are now forwarded with the machines according to order

Effects of the Vibratory Magnetic Machines.

In describing the effects of these machines in the former editions of this work, we were very cautious in our commendations of this new mode of treating diseases, as a sufficient time had not elapsed since we com-

medical magnetizing with these instruments to obtain a full and unbiased view of the subject. We had many doubtful cases under treatment, the result of which could not then be known. Among these there were some of the worst cases of *distortion* of the spine, and lumbar abscess in children, of from one to eight years old, we have ever seen. Some of these cases were complicated with disease of the sacrum, hip joint, mesentery or lungs. Some of the worst cases are now cured, and all the others are so far advanced in the cure, as to leave little doubt of their entire recovery.

The great number of lateral curvatures of the spine, and the extraordinary effects of the machines in these cases, continue to excite the greatest interest. The cases we are now magnetizing have continued from one to twenty-eight years, and many of them are of the worst description, yet they are all advancing to an erect position. In some of these cases the extent of the curvatures has been so great as to cause a displacement of the heart, lungs, stomach, spleen and intestines. The heart beats in the right, and is not heard in the left side, while the left lung occupies its position. The stomach and spleen are depressed, and crowded into the left or right side, and displace the intestines, but as the spine becomes more erect, they gradually re

sume their natural positions. These are *all* cases of tubercular disease of the muscles, or *rheumatism*, in which *white swellings* are often formed under, over and around, the shoulder blades, on the hips—the side of the lumbar vertebræ, and sometimes on the lower extremity of the spine.

Young females who have rheumatism, are always in danger of such a deplorable result. The disease is easily distinguished; for if a person has rheumatism—no matter what part of the body or limbs is affected by it—pressure with the fingers upon the intervertebral spaces of the cervical vertebræ will produce *pain* more or less severe, in proportion to the intensity of the disease. In cases of rheumatism, acute or chronic, affecting the head, face or limbs, the machine is, and will continue to be, invaluable. Nearly all the cases of dizziness in the aged, are cases of rheumatism, and are the premonitory symptoms of palsy or apoplexy, which may be easily reduced, and their lives prolonged by the use of this instrument. Rheumatism may, and does attack, one or both hemispheres of the brain, as it does a finger, hand or arm, and may paralyze them in the same manner, or the spasms from this cause may be so strong as to rupture the blood vessels of the brain, as they frequently do; when the blood flows

into the sinuses, and ventricles, or forms deposits in its substance, as every physician knows, who distinguishes diseases by the magnetic symptoms.

In all the cases of disease of the organs the machine is of great service, and in some cases it is indispensable to a successful treatment, among which are some cases of amenorrhea, chlorosis, leucorrhœa, and prolapsus uteri, &c.

We have used the instrument in one severe case of bilious fever with great success. It reduced the pain in the head, stomach, liver, and back, with the paroxysms of fever, in the most prompt manner. In examining this case, severe pain was produced by pressure on the sub-occipital nerves connected with the brain, and pressure on the ganglions of the spinal nerves, in the intervertebral spaces connected with the stomach, liver, secum, and small intestines, produced the same effect, showing it to be a case of acute tubercula of the serous surfaces of these organs, instead of a case of gastro-enterete, or acute disease of the mucous surfaces of these organs.—These magnetic and invariable symptoms which point to the disease, like the needle to the pole, are always present in bilious, remittent, congestive, yellow, and *nervous* fevers. We have always found them in every

case we have seen from the great lakes, to the Balize in the Gulph of Mexico, and we have published and circulated more than 20,000 copies of different medical works, in which these symptoms are delineated; yet the professors of Astrology in our Medical Colleges call these fevers, cases of disease of the mucous surfaces of the stomach and intestines, from the aspects of the tongue and urine, and the color and odor of the stools, as in other cases of disease, and continue to teach such nonsense to the students of medicine. They have even had the address to induce grave legislators (tell it not in Gotham) to pass laws to prevent any person from practising physic until his head was full of such absurdities, as seen by their sign manual.

In two cases of paralysis, in consequence of prostrated fever; one of the entire left arm and hand, and the other of the extensor muscles of the left leg; the machine has had the happiest effect.

The first was a case of a little girl aged eight years. She had bilious fever when she was four years old, during which time the left arm was observed to be paralysed; since which time it hung by her side like a rag without the least power in the muscles of her arm, hand or shoulder.

On the first application of the buttons to

the hand and shoulder; about two months since she raised her elbow two or three inches, and she can now flourish a cane with the same hand.

The second case was that of a young gentleman aged twenty years. He had bilious and then typhus fever, more than a year since, and when beginning to recover, found he was unable to raise the left leg. Various remedies were resorted to including the spring and bandage, without the least effect. We commenced magnetizing the leg about ten weeks since under the full power of the machine, which he bore every day without the least uneasiness, or any apparent effect during three weeks. He however soon began to raise his toes, and then his foot, and next his leg, and in about eight weeks from the time we first commenced magnetizing him he began to walk without his cane.

A recent but bad case of paralysis, of the right arm, of a mechanic aged twenty-eight years was cured with the action of the machine in about two weeks. We have also apparently cured in the same way, four cases of recent and partial paralysis of one side of the face, in one of which there was slight paralysis of the right arm and leg.

These cases of paralysis were not complicated with disease of the organs, and required

no medicine. We have also had three or four cases of paralysis of the muscles about the ankles, approaching what is called club feet that required no medicine, but nearly all of the other cases we have had since we commenced magnetizing with the machine have required medicine.

We have tried faithfully to cure chronic diseases of the organs with the machine alone, but have failed in every case of any importance, and were at last compelled to resort to the aid of medicines applicable to the cases, when the disease has given way, and such patients have recovered their healths much sooner than they have before when under the influence of medicine alone.

Besides many recover when in the last stage of the disease, who could not do so under the influence of medicine alone.

We have also observed the daily effects of the machine alone, on tubercular and mucous disease of the throat and eyes, and also its combined action with medicine in these cases where we could see, as well as hear, of the daily and weekly progress of the cure, so as to be able to form a more correct prognosis of the progress of the cure in the lungs or other organs, and the results have been so palpable as to leave no doubt of the great importance of combining the action of the

machine, with other remedies in diseases of the brain, throat, heart, lungs, stomach, intestines, liver, kidneys, and uterus, as well as diseases of the spine, muscles and joints of the limbs.

On a comparison of the effects of the machine in a great number and variety of cases, it appears that its extraordinary effects must be imputed mostly to its power of restoring lost motion, by its action upon the magnetic organization of the system.

In acute or inflammatory diseases the motion of the forces along the membranes or substance of an organ, are obstructed at some point, when the motions of the fluids in the blood vessels, are instantly impeded and accumulate around that point and distend it. The forces from the machine if soon applied, re-establish the motions of the forces in the membrane or substance; and consequently the motions of the accumulated fluids, and health is re-established in the most prompt manner.

In chronic diseases, the phenomena presented to us are very different. The motions of the forces along the minute lymphatic and absorbent vessels of the serous surfaces become obstructed, when the motions of the fluids in these vessels are impeded, and accumulate in them and in the lymphatic or se-

creting glands and distend them, or the follicles or excreting glands of the mucous surfaces are distended in the same manner.—The strength of the magnetic organization of the glandular system of these different surfaces of an organ, limb, or other structure is consequently increased; while that of the general organization of the system is decreased in the same proportion; for the strength of the body or of a limb, depends entirely upon the strength of their magnetic organization; The muscles being the mere pullies and ropes by which it moves the body, head, eyes, or limbs.

Besides, acute diseases announce their advent, as thunder does a storm, while chronic diseases advance stealthily and slowly, and rarely excite the attention of their victims—guardians, or their attendant professors of Astrology, until these tuberculations in one case, and vegetations, in the other, have gained great advantages in age and strength, and it must consequently, and does require a much longer time to reduce and restore lost motion in these regular organizations, than that of mere accumulations of fluids, as in the case of acute diseases.

If, however, we commence magnetizing in the first stage of chronic diseases, they are reduced very fast as in the cases of tubercu-

lar disease of the throat and lungs, and there is no reason why physicians should not do so as there is now no difficulty in distinguishing chronic diseases with facility and certainty in the first as well as the last stage.

Besides restoring lost motion the Vibratory Magnetic Machines (at least) opens the pores of the skin, and increases the strength, and these effects of these instruments are very constant, and uniformly noticed by these patients.

In nearly all the cases we have magnetized including the case of fever, we have found it necessary to use medicine of some kind, or that indicated by the disease, and such patients have not only recovered much faster than they usually do under the old treatment, but a great many entirely recover their health in cases in which the common alopathic and homœopathic remedies and a great variety of quack medicines have entirely failed.

CHAPTER III.

Observations on Magnetizing.

The buttons and the spinal nerves. In magnetizing for disease of the organs, we have directed the positive button to be placed over the ganglion of the spinal nerve connected with the organ; and as this is a matter of great importance we have given an engraving (page 23) to aid the magnetizer in placing the button. The cervical, dorsal, and lumbar, vertebræ, or joints of the neck, back and loins, are numbered and may always be referred too; yet the novice should always attain a habit of pressing on the intervertebral spaces to ascertain the precise spot for the button, until he has learnt to determine it by the eye; for there will *always* be found a *tenderness* there proportioned to the intensity of the disease in the organ. Having found the place for the button, the figures (page 17) representing the outlines of the organs, will also aid the novice in determining their relative position, and in the application of the buttons in other cases to which we have referred. If however the magnetizer should have doubts in regard to the spot where the button should be placed in any obscure case, the *negative* button should then be placed and moved over the diseased organ, and passes made at the

same time with the positive button over a number of intervertebral spaces that will be certain to include that which is connected with the diseased organ.

Preparation for magnetizing. In magnetizing for diseases of the chest, stomach, liver, spleen or kidneys, the entire clothing should be removed or stripped down as far as the hips; for it is impossible to magnetize in a thorough and scientific manner, without such a preparation. The same course must always be pursued in magnetizing for lateral curvatures, and distortions of the spine. In tubercular disease of the lungs it is a matter of great importance to move the negative button over the entire surface of the chest, from the neck to the lower points of the short ribs, both in the front, back and sides of it, as well as in the axilla or arm pits.

When the negative button has been passed over the entire surface of the chest, with the positive button on the spinal nerves connected with it, or with the lungs, this last or positive button should be placed on the tongue, while the negative button is moved again over the entire surface of the chest as in the case of chronic bronchitis. The tongue should be run out as far as possible, when the patient should take the button in hand, and press it hard upon the tongue un-

der a moderate power of the instrument, while the magnetizer moves the other over the *entire* surface of the chest.

Every day's experience is adding new proofs of the *great importance of magnetizing the lungs in this disease*, and no motives of a false delicacy in females should be allowed to interfere to prevent the free action of the buttons in the manner we have described.

Spine. In magnetizing in cases of lateral curvatures of the spine, the preparation must be the same as above described; for it is very hard work to magnetize in these cases, and the magnetizer must have free access to the muscles of each side, as well as those of the back, and should not be encumbered with the dress of the patient.

Rheumatism. There are many cases of this disease in which the preparation for magnetizing should be the same as that in disease of the organs, as there are many more cases of this disease than is dreamed of in the philosophy of the astrologers of the schools.

There are also cases of rheumatism, and also of disease of the hip joint, and white swellings, and caries of the thigh and knee, in which patients must be undressed in a manner to enable the magnetizer to place one

button over the lumbar vertebræ, and hips, while the other is passed over the thigh, hip, or knee.

Chronic Tubercula.

CHRONIC DISEASE OF THE SEROUS SURFACES.

Tubercular disease of the organs.

In the notice of the effects of the Rotary Magnetic Machine, in the April number of the Dissector, we suggested the probability of its great importance in the incipient stage of tubercular consumption, from the results obtained in the few cases, in which we had then used it. Further trials, in more than 100 cases, have not only confirmed that opinion but have shown it to be very useful in the last stage, especially in promptly reducing the pleuro-peripneumony that often attends tubercular disease of the lungs. In many cases it lessens the cough and expectoration, by reducing the mucous disease of the bronchial tubes that traverse the tuberculations.

In magnetizing the lungs, the button conveying the weakest, or positive force, is placed over the posterior spinal nerves connected with them, in the intervertebral spaces, between the 7th or last servical, and first dorsal vertebræ, while the other, or negative

button, conveying the strongest force, is moved slowly over the front part of the chest, with the instrument graduated to a moderate power. This practice is adopted in consumption or pneumonia, for the purpose of first exploring the lungs to find the place most diseased, as the action of the instrument will be much more sensibly felt when the button passes over it, and it will require more magnetizing than other parts of the lungs. The positive button is then placed on the tongue, and the negative moved over the entire surface of the back part of the chest.

In exploring the chest, and in magnetizing, whether for disease of the lungs, heart, or pleura, the positive button should be placed over the left intervertebral space in magnetizing the left side of the chest, and over the same space on the other side in magnetizing the right side of the chest. In such cases the process is continued only from 5 to 10 minutes, and once a day is generally sufficient.

Tubercula of the heart—hypertrophy. In this case the negative button should be placed below the lower apex of the heart, where it may remain 10 or 15 minutes, or it may be moved over that region under a very moderate power of the instrument.

Pleurisy, Acute or Chronic. In these

cases the negative button should be placed over the seat of the disease, or place where the pain is felt, under a very moderate power of the instrument, and the other on the place above described.

Tubercula of the Stomach—Dyspepsia.—In magnetising the stomach, the *positive* button is placed over the space between the *first* and *second* dorsal vertebra, and the *negative* over the pit of the stomach.

Tubercula of the Duodenum.—In magnetising the duodenum, the positive button is placed over the space between the second and third dorsal vertebra, and the negative two or three inches below, and on the right side of the pit of the stomach.

Tubercula of the Colon.—Place the positive button over the space between the third and fourth dorsal, and make passes with the other downwards over the stomach and bowels.

Tubercula of the liver—acute or chronic disease of the liver. The positive button should be placed over the intervertebral space of the right side, between the 7th and 8th, dorsal vertebra, while the other is moved slowly around one half of the body, from the pit of the stomach below the short ribs to the spine, and then over the short ribs.

Tubercula of the spleen—acute or chronic. The positive button should be placed on the opposite side of the spine, to that in the case

of the liver, and the other button over the left side as in the case of the liver.

Tubercula of the large intestines. The positive button must be placed over the intervertebral space, between the 5th and 6th dorsal vertebræ, and the other over the intestines on the right and left side, as indicated by the seat of the disease.

Tubercula of the small intestines. The positive button should be placed over the intervertebral space, between the 11th and 12th dorsal vertebræ, and the other over the front part of the abdomen, right or left of the medium line, as indicated by the seat of the disease.

Mesenteric Diseases. In these cases the buttons should be placed over the spine and abdomen, as in the instances of the large and small intestines.

Kidneys. In tubercular disease of the kidneys—acute or chronic, the *negative* button should be placed over the intervertebral space between the 12th dorsal and 1st lumbar vertebræ, and the other over and below the pubis.

Cystis. The positive button should be placed over the same intervertebral spaces as in cases of the kidneys, and the other over and below the pubis.

Prostrate Gland. In these cases the posi-

tive button should be placed over the intervertebral space, between the last lumbar vertebræ and the os-coccyx, and the other over and above the penis.

Uterus. In magnetizing this organ, the positive button should be placed over the intervertebral spaces, between the 1st and 2d, and 2d and 3d lumbar vertebræ, and the other over the vulva below the pubis.

Ovaria. In tubercular disease of the ovary, the breasts, or mammæ are not of the same size—that on the same side of the diseased ovaria being larger than that on the opposite side, in consequence of atrophica of the latter from direct sympathy with the diseased ovaria. The positive button should therefore be placed over the atrophied breast, and the other over the ovaria of the opposite side.—The same course should be pursued in *chlorosis*, *amenorrhœa*, &c.

Leucorrhœa. The positive button in these cases, should be placed over the intervertebral space, between the last lumbar vertebræ and os-coccyx, if tenderness is elicited by pressure there, otherwise it will be found in the lumbar vertebræ, over which this button must be placed. In the first case the negative button should be placed over the front and upper part of the perineum, and in the last over and around the pubis.

Prolapsus uteri. Magnetise the uterus daily, as directed in page 54. Introduce a small piece of very fine sponge of the size of an egg into the upper part of the vagina, with a string six inches long, tied around its lower end, in cases of married ladies, and then inject into the vagina once a day, a solution of acetate of iron. Give mag. gold pills. *Specific.*

In tubercular disease of the stomach and uterus—the positive button should be placed over the intervertebral space, between the 1st and 2d dorsal, and the other over the pubis, in consequence of the direct sympathy between these organs.

In tubercular disease of the cerebellum and uterus—the negative button is placed on the organ of amativeness, on one side, and the other on the opposite side of the pubis, and we should here observe that females can and should magnetize themselves, in cases of disease of the uterus, and vagina, &c., and should *never* allow a physician to do so while they have strength to do it themselves, or can procure the assistance of a female.

Brain. Tubercular disease of the brain is distinguished in an instant, by the pain produced by the pressure on the sub-occipital nerves, on the sides of the space between the head and first cervical vertebræ, or joint of the neck, *in the absence of tubercular disease of the throat.* It may also be distinguished by

the pain darting into the brain, when the disease is in its active state, or by severe pain in the head, in the absence of an injury. In magnetizing this organ, we should always observe the greatest caution, and always commence with the weakest power of the instrument.

Sick head ache. The positive button is placed over the organ of amateness, and the negative over the organ of causality on the opposite side of the head, and moved quickly over that side of the forehead, when the positive button is placed over the opposite organ of amateness, and the negative over the opposite organ of causality, and moved over that side of the forehead as before. The sitting is thus concluded generally in less than one minute.

In head aches—other than those that are periodical, and called sick head ache, we place the negative button over various organs as indicated by the pain, or seat of disease, while the positive button is moved around the neck.

Tic-douloureux. The positive button is placed over the plexus of nerves, in front of the ear, when the other is placed over the pain of the face, under a strong power of the instrument.

Strabismus—Squinting. The positive but

ton is placed over and pressed in to the corner of the eyelid over the paralyzed muscle, and the other over the opposite corner of the eye, and the sitting concluded in one minute.

Eye. Diseases of the eye, acute and chronic.—The negative button is placed over the eyelids in these cases, and the other over the back part of the neck.

Nose. Diseases of the nose, acute or chronic. The negative button is placed over the nose in these cases, excepting polypus, in which case the buttons are reversed.

Antrum. In case of disease of the antrum the negative button is placed over the antrum, and the other over the neck.

Tooth-ache. The negative button is placed over the diseased tooth, and the other in front of the ear.

Throat. In diseases of the throat, acute, or chronic, the buttons are placed on the opposite sides of the neck, under the ear, and moved slowly towards the chin, or the positive over the sub-occipital nerves, and the other on the side of the throat.

Muscles. Tubercular disease of the muscles—Rheumatism, acute or chronic.—Pain is produced by pressure on the intervertebral spaces of the cervical vertebræ, which in-

creases with the intensity of the disease ; and in magnetizing for rheumatism the positive button should be placed over the back part of the neck, at the commencement, and at intervals during the process—no matter whether the disease is in the arm, finger, leg or toe, and the other should be placed first in the hollow of one foot, and then in the hollow of the other ; sometimes the positive button may be held in the palm of one hand, while the other is held in the hollow of the opposite foot, or over the point of pain, if any, in joint or limb.

Paralysis. In cases of paralysis, patients should be magnetized in the same manner as in rheumatism.

Chorea. St. Vitus' dance—Tubercular disease of the cerebellum. The negative button should be placed over the organ of amateness, while the other should be placed on the affected limb, or limbs, of the opposite side.

Epilepsy. Tubercular disease of the cerebellum.—The negative button should be placed over the cerebellum, and the positive on the neck or ear of the opposite side

Catalepsy. Tubercular disease of the veriform process, in the medium line of the cerebellum, (organ of motion.) In these cases the positive button should be placed over the

first cervical vertebræ, and the other over the organ of individuality.

Deafness. Tubercular disease of the eustation tube.—In these cases, the positive button should be placed on the nose and the other in the ear.

Joints and Limbs. Tubercular disease of the joints and limbs—*white swellings*. in these cases both buttons are moved over and around these swellings, and along the limbs, whether in a sound or ulcerated state.*

Spine. Tubercular disease of the spine—distortion of the spine—distortion of the spine and lumbar abscess. The buttons are applied around and over the distortions, and abscesses, as in the case of white swellings, and along the whole length of the spine.

Spine. Lateral curvatures of the spine—We have had 67 cases of lateral curvatures of the spine from the 1st of April to the 8th of Oct. 1844, in which there was a great variety in the form of the curves, and a great difference in the time since they commenced as well as of their ages. The time of their existence was from 1 to 28 years, and their ages from 8 to 53 years.

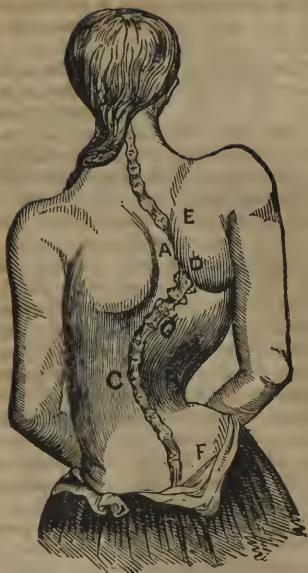
The time required to straighten a spine, or make it resume its natural position depends so much upon the circumstances attending each individual case, as the form of the curve the

* In the meantime a magnetic plaster is applied to these swellings.

time of its existence, and the health of the patient, &c., as to make it necessarily very uncertain.

The first object to be obtained is to lessen the action of the tuberculated muscles on the posterior side of the curves, and increase it in the paralyzed muscles on the other, to enable us to make the spine pass the centre and curve in the opposite direction, *under the action of the buttons*.

When this object is attained and we can make it pass the centre at each sitting, the muscles will soon maintain it in its natural position. In twenty-two cases in which the curvatures had existed from one to two years, they passed the centre the first sitting, while it has required more than two months to effect this object in five cases of long continuance—The muscles are always swelled, thickened, or tuberculated on the posterior side of the curve, (as seen in the following engraving) and emaciated or atrophied and paralyzed on the other. In magnetizing these cases the positive button is placed over the paralyzed muscles at B, while the negative button is passed over the tuberculated muscles in the right shoulder and hip, at intervals from 6 to 15 minutes; in the mean time the *negative* button is placed over the tuberculated muscles at C, while the positive button is moved



over and around the left shoulder along the inside of the curve at A, under a power of the instrument that can be easily borne.—

Some of these bear only a moderate, while others will bear its full power. We commence with a moderate power at each sitting and then gradually increase it to the full power that can be borne, bringing the spine up as straight as possible at the close of each sitting. In some bad cases assistance is required to raise the atrophied shoulder and keep the paralyzed muscles distended under the action of the buttons, much however will depend on the tact, perseverance and experience of the magnetizer.

In magnetizing in these cases, as well as every other, the passes with the buttons should be downwards, or in a direction from the head to the feet, and this is a rule that should not be departed from, and to avoid mistakes in the use of the different buttons, magnetizers should attain a habit of taking the negative button in the right hand, and the positive in the left.

The effects of the action of the Machine upon the muscles in these cases, is most extraordinary, most wonderful, and gives us true conceptions of the unlimited power of the all pervading forces by which we obtain such results.

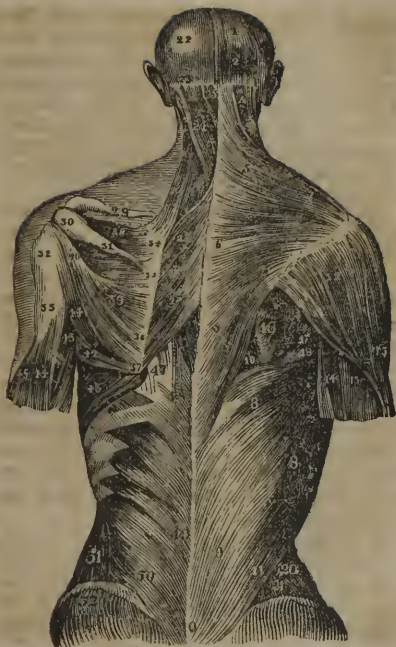
The plate in page 63 exhibits the first layer of muscles along the back and side of the body; the skin and cellular tissue being re-



moved in order to show the direction of the fibres in each muscle, and their points of attachment; to aid magnetizers in the proper application of the buttons, to obtain the greatest effect from the machine. There is here, 10, 10, 10, 10, a fine view of the trapezius muscle of each side, extending from the occiput 1, to the spinous processes of the last dorsal vertebra.

The effect of the machine is much greater when the buttons are applied near the different attachments of the muscles than it is when they are applied in the intermediate places. So if one button is applied near the occiput 1, and the other near the point of the shoulder 4, the effect will be greater than it would, if one of the buttons was placed on any intermediate place along the spine. The same difference is observed in the position of the buttons near the attachment of the same muscle at 4, and near the insertion of the teres muscles under the lower point of the scapula 5, and any intermediate place along the spine.

It is the greater and lesser teres 41, 42, page 65, and the greater rhomboid muscles 28, 19, that are tuberculated, and raise the scapula in lateral curvatures of the spine. The infra-spinous muscle 16, is frequently



affected at the same time with a slight and sometimes with a large white swelling. Two of these last have disappeared in an instant, under the full power of the machine, leaving apparently nothing behind, but the skin and bones of the scapula. Large Broncoceles—(goitres) have also disappeared in an instant, under the full power, and frightful action of the instrument.

In a great majority of the cases of lateral curvatures of the spine, the curves are nearly in the form of the letter S, more or less curved, and making a deviation of from one to four inches from the median line. The upper curve is generally to the right, and the lower to the left side, where the latissimus dorsi muscle 11, is tuberculated. There are, however, cases where the upper curve extends down to the 2d or 3d lumbar vertebra—the ribs and scapula making a great arch to the right, with only a slight deviation of the other lumbar vertebræ to the left side; and there are other cases in which there is a great curve of the lumbar, with little or no deviation of the dorsal vertebræ.

Breast or mammæ. In cases of white swelling, or of chronic tumors of the breast, the negative button should be applied on the breast, and the positive on the back of the neck.

Hernia, strangulated—Rupture. Apply the positive button over the spinal nerves connected with the stomach, and the negative over the herneal sac, and gradually increase the power as far as it can be borne, and repeat. Give Aconite.

Tetanus. Magnetise the stomach and muscles as directed in pages 52-57. Give Aconite.

Cancer—cancerous swellings. Magnetize them once or twice a day. Place the positive button on the back of the neck or in one hand, and the other over the swelling. Give mag. gold pills.

Hydrophobia. Magnetize the muscles, stomach, and throat, as directed in pages 52-57. Give Aconite.

Uterine Inertia, in labor. Magnetise the uterus by placing the positive button over the lumbar vertebra, and the other below the pubis and over the vulva, and repeat.

Uterine Hemorrhage. Magnetise as in uterine inertia. Give ergot—and when danger to life is imminent opium, warm wine or brandy. Nothing checks hemorrhage so soon as magnetising.

Impotence The positive button is placed over the hollow of the neck, and sometimes over the lumbar vertebra, and the other on the testicles in males, and below the pubis,

and over the vulva in females. Give magnetised gold pills. *Specific.*

Wakefulness—sleeplessness. Magnetise the muscles as directed in page 57. *Specific.*

Poisoning by opium, morphine, Prussiac acid, or any other vegetable or animal poison, and also by arsenic; magnetise the stomach, and muscles, as directed in pages 52–57, after having first given the sulphate of zinc to vomit the patient, or used the stomach pump; and then animal or vegetable charcoal finely pulverised. Animal the best.

Piles—hæmorrhoids. The positive button is placed over the lower lumbar vertebrae, and the negative over the anus. Cases of from one to fifteen years standing, which resisted every other remedy have yielded to the action of the magnetic machine. Give mag. gold pills.

Constipation. Magnetise the stomach and intestines by placing the positive button over the spinal nerves connected with the stomach, and make passes with the negative button downwards from the pit of the stomach over every part of the bowels, or intestines—repeat once or twice a day. Give *nux v.* alternated with plumbum. *Specific.*

Nipples. In cases of sore nipples accompanied with sore mouth, the positive button should be placed on the tongue and the negative over the nipple—in other cases, the positive button should be placed over the nipple, and the negative in the groin, or over the ovaria of the opposite side.

Nipples retracted. In cases of retraction of the nipples the positive button is placed over the nipple, and the negative in the groin, or over the ovaria of the opposite side, and is said to be very effectual.

Chronic Diarrhæa. Tubercular disease of the intestines. The positive button should be placed over the intervertebral spaces, between the 11th and 12th dorsal vertebræ, and the other moved over the surface of the abdomen.

Catarrh. (Chronic.) Tubercular disease of the Nose or frontal sinus. In these cases the positive button should be placed over the first cervical vertebræ in the hollow of the neck, and the other on the top and sides of the nose.

Aphonia. Loss of voice. Dr. L. D. Fleming, of Newark, N. J., who recovered his voice rapidly under the action of the instrument, thinks it is better to apply one of the buttons,—the negative—over the organ of imi-

tation, instead of both on the neck, under the angle of the lower jaw, from the effects produced in his case.

Testicle. In chronic swelling or chronic tubercula of a testicle, the buttons should be moved over and around it; and then the positive button should be placed over the intervertebral space between the last lumbar and os-coccyx, while the negative is moved over the testicle.

Hydrocele. In these cases the testicle should be magnetized in the manner described above, under a strong power.

Varicocele. These cases should be magnetized in the same manner above described, and is very effectual.

Chancres. The negative button should be applied on a chancre, and the positive over the intervertebral space between the last lumbar vertebræ and os-coccyx, and is said to be very effectual.

Buboes. The negative button should be placed over the buboes, and the positive over the lumbar vertebræ.

Hemorrhage from the Lungs.

Nearly all the cases of hemorrhage from the lungs occur within four days of the new moon or of the full moon, and the natural and regular periods of hemorrhage from the uterus

generally occur within the same time. These facts were well known to the ancients, and a knowledge of them is a matter of great importance to both sexes who are predisposed to



hemorrhage from the lungs, to enable them to avoid any exciting causes of hemorrhage at

these periods, and particularly to females, for obvious reasons.

A solution of this lunar influence is found in the more rarified state of the atmosphere, from its expansion at K J and J K; at the new moon, c, and full moon, E, from the combined action of the sun and moon upon it, at these periods, in the direction seen in the figure, and in consequence of which the pressure of the atmosphere on every square inch of the body, and of the cavities exposed to its influence, is greatly reduced.

The diminution of pressure commences three days and a half before the new and full moon, and gradually increases until it arrives at its maximum, at the time of the new and full moon; then it begins to decrease, and goes on decreasing to the end of three days and a half, when it is minimum or 0, and so continues through the intermediate periods.

When the moon is in its syzygees, E, its forces are extended to the atmosphere of the earth, B, by the action of the forces from the sun, A; but when the moon is in its quadratures, D L, the extension of its forces beyond the (parenthesis) is interrupted by the forces from the sun, and the density of the atmosphere is then at its maximum.

The periods of *excitement* and *repose* in chronic diseases are generally very regular

the first occurring in the periods of the new and full moon, and the latter in the intermediate periods.

When hemorrhage commences from the lungs, the arms above the elbows and the legs above the knees, should be bound with handkerchiefs, moderately tight, until the hemorrhage ceases (for the purpose of checking temporarily the accumulation of blood in the heart and lungs.) The patient should at the same time drink freely of alum water, or salt water. The violence of the hemorrhage soon ceases under this treatment; the use of these drinks should, however, be continued until the bloody expectoration has ceased, when these safe and efficient remedies will finish their work by exciting the action of the intestines. A recurring disposition to hemorrhage should be checked with *Aconite*, or *Acetate of Lead*. One drop of the strong tincture of *Aconite*, or 10 drops of the first dilution in a tumbler of water may be taken once or twice a day, or the acetate of lead (sugar of lead,) if at hand, may be also used in these cases, 3 or 4 grains, or a quantity that will lie on a sixpenny piece, made into 3 or 4 pills, with moist bread, may be taken at intervals that may be determined by the urgency of the symptoms. Drawing blood from the arm in large quantities under such circum-

stances, as is commonly practised, is not only positively injurious in a great majority of cases, but it is often fatal; and such patients are never in greater danger than when they are in the hands of a physician whose knowledge is bounded by inflammations.

The few cases of hemorrhage from the lungs, which occur when the moon is in its quadratures, or when it is moving from the octant *rr*, to that at *m*, and from the octant at *s*, to that of *I*, are those that occur in chronic bronchitis, or chronic disease of the mucous membrane that lines the inside of the bronchial or air tubes, which rarely amounts to more than a wine glass, and is in general a matter of little consequence, requiring only the exercise of common prudence at those periods to prevent its recurrence.

Hemorrhage from the serous surfaces of the lungs or from its serous membranes, generally occur in the rarified state of the atmosphere, at the period when the moon is in syzygees or apogee and perigee; while hemorrhage from the mucous surfaces, or the mucous membranes of the lungs generally occur in the dense state of the atmosphere, at the period when the moon is in its quadratures, as we have ascertained in the most satisfactory manner, by a long series of observations.

Fever and Ague. In the cold stage of this disease, the patient may hold one button in each hand under the greatest power of the machine that can well be borne, until the chills cease, and in the hot stage they should be magnetised in the manner directed in fever. Pages 80-81. Give ergot.

Menstrual colic. Magnetize as in uterine inertia, page 67, 75.

Colic. Magnetise as in constipation. Give Colocynth.

Hemorrhage from the lungs. Magnetise this organ by placing the positive button over the spinal nerves connected with it, and make long passes with the negative button quickly over the chest. The hemorrhage ceases instantly as in cases of hemorrhage from the uterus, &c., &c. Give aconite.

Throat. Tubular diseases of. It is distinguished by the magnetic symptoms, and the throat is thickened and *contracted*, and not *dilated*, as in mucous disease of the throat.

Dysentery. Place the negative button over the anus, and the positive over the last lumbar vertebræ, under a very moderate power of the machine, and then increase the power until the pain ceases, and repeat if the pain returns. Give mercurious sol.

Tubercular disease of the organs we repeat is invariably distinguished, in all these cases, by pain more or less severe (in proportion to the intensity of the disease) produced by pressure on the ganglions of the spinal nerves, in the intervertebral spaces along each side of the spine—no matter what name may have been given to the disease by physicians, nosologists, or other medical writers.* It is a disease of the secreting or lymphatic system in the serous surfaces, in which the posterior spinal nerves terminate, and is propagated from the skin to the limbs, and from the limbs to the organs, and from one organ to another. The seat of the disease in the skin, limbs, and spine, is easily seen, and its precise situation in the organs is in general easily determined, by exploring them under a very moderate power of the instrument.

Patients affected with tubercular disease, will bear only a moderate power of the machine, and among these there is a great difference in susceptibility to its action, as in the cases of mesmeric influence. Generally they will bear very comfortably, one half of the power of the instrument, but there are a few

* These symptoms are magnetic ; for, when we press upon these ganglions in the active state of the disease, the pain will dart into the diseased organ, with a force which increases with the intensity of the disease.

that will go into a fainting fit,* or into the mesmeric state, under its weakest power.—The greatest caution should, therefore, be exercised in graduating the instrument, especially at the first sitting. In fact, children and weak-minded people should never be allowed to use it. The time occupied in magnetizing varies in the different cases—generally from five to fifteen minutes, when the magnetic organization of the system becomes so tense as to give violent shocks to the magnetizer, and sometimes headache to the patient if the process is continued too long.

In nearly all the cases of tubercular disease, other remedies are required to keep up a steady magnetic action. Magnetizing restores lost motion in the tuberculated portions of the organs, limbs, and other structures—sometimes permanently, but generally temporarily, making it necessary for such patients to use other remedies at the same time. With these, in conjunction with the action of the instrument, they recover very rapidly—even cases so far advanced as to preclude any hope of their recovery by any other means. Magnetic or magnetized remedies are the only

* We have had only three cases of this kind—one, a lady, in magnetizing the brain, one a lady in magnetizing the lungs, and the other, a gentleman, in magnetizing the chest. They were all very subject to fainting fits from trifling causes.

ones that are of any value in tubercular disease of the organs and limbs. We continue to use the magnetized gold pills in these cases with a success in conjunction with the action of the machine that precludes the necessity of any other excepting only a few cases to palliate an urgent symptom in the periods of excitement, and we should here remark, that the daily effects of the action of this instrument affords the most conclusive and overwhelming proof of the correctness of the magnetic practice we have long pursued in tubercular disease, and gives it a most extraordinary and glorious triumph over the old Astrological practice of the Schools.

CHAPTER IV.

Acute Diseases.

ACUTE TUBERCULA.

Inflammation of the Serous Surfaces.

Inflammation or acute tubercular disease of the serous surfaces of the organs and limbs, is distinguished by the magnetic symptoms, in the same manner as chronic tubercula of these surfaces, and in magnetizing in these cases of disease of the organs the positive button should be placed over the ganglions of the spinal

nerves, in the intervertebral spaces, and the negative over the seat of the disease in the organs, in the same manner as described in cases of chronic disease of these surfaces, excepting cases of inflammation of the kidneys, when they should be reversed. In pleurisy, *pleura costalis* or *pleuro peripneumony*, the positive button should be placed over the intervertebral spaces between the 7th or last cervical and first dorsal vertebræ, as well as in the case of peripneumony or inflammation of the lungs, and the negative over the pain.

The action of the Magnetic Machine reduces inflammation of the serous surfaces with great rapidity. It reduces acute diseases of any of the organs or limbs in from 3 to 5 minutes, when applied immediately after the attack, or commencement of the disease.* When however it is not applied at that time, it will require a longer time to reduce the inflammation. The effect is the same in inflammatory rheu-

* Extract of a letter dated

" Ovid, Ohio, June 14, 1844.

" My wife a few days since presented me with a fine boy, and as is often the case she was troubled with a caked breast, and when they began to talk of broken breasts I determined to try the machine; I applied the buttons each side, passing them round, and in two minutes the cake was entirely removed—so we have no more of that trouble. My health continues about the same—rather improving.

Yours, &c.

O. M.

matism or in gout. It stops the progress of the disease from one limb to another, after the first application of the instrument.

The same results are also obtained in bilious fever, as ascertained from various trials of the machine in these cases by different physicians. The fever and the pain is reduced very soon when the forces from the instrument are applied immediately after the attack of the disease, but if not soon applied it requires a longer time to reduce the fever, in proportion to the time elapsed from the commencement of the disease. We suggested in the first edition of this work the probability of the great importance of this machine in yellow fever, and no doubt is now entertained but it will reduce that disease with great rapidity, as well as congestive and typhus fevers.

Fever.—Bilious, Congestive, Typhus and Yellow Fever.—The spine should always be examined in these cases of fever, to determine the true character of the disease, whether of the serous or mucous surfaces, and the number of organs implicated in it; and this can always be done with perfect ease and certainty by the presence or absence of the magnetic symptoms. When these are present, the positive button should be placed over the intervertebral spaces, and the negative moved slow-

ly over the diseased organ under a very moderate power of the instrument to find the seat of the disease in the organ, and determine the amount of the power that can be borne with ease to the patient.

In the absence of these symptoms, the negative button should be applied to the intervertebral spaces, connected with the stomach and intestines, while the positive is moved slowly, first, over the surface of the stomach, and then over the intestines—observing the rule to have a button over the spinal nerve connected with the organ which we wish to magnetize.

The common remedies, or those found most successful, should be used when indicated in the treatment of these cases of inflammation of the serous surfaces, in conjunction with the action of the machine.*

CHAPTER V.

HYPERTROPHY OF MUCOUS SURFACES.

CHRONIC.

Bronchitis. (Chronic.) The action of the rotary magnetic machine, alone, will cure all the cases in the first stage of this disease of the membrane that lines the inside of the air tubes. The disease is distinguished by cough

* See intermittent, or chills and fever, page 182.

and expectoration, and the absence of the magnetic symptoms of tubercular disease of the lungs.

The *negative* button should be placed first over the intervertebral spaces, between the seventh cervical and first dorsal vertebræ while the other is passed slowly over the whole surface of the chest, including the back part of it, as in the case of tubercula of the lungs, or consumption. The *positive* button is then placed on the tongue, and the other moved quickly over the whole surface of the chest, and the sitting concluded in five minutes. In the absence of the action of the instrument, or to aid it, the following prescription will be found one of the best.

R. Hard Bal. Copa. and Cubebs 3iiss, Ext. Hyos. 3ss. Make 100 pills. Dose 1 pill three times a day, after eating.

The following is also one of the best. R. Bal. Fir. 2 oz. Olive oil, 2 oz. Lemon juice 4 oz. Honey 8 oz. Mix and simmer together slowly half an hour, and bottle it. Dose a table spoon, morning and evening.

COUGH. *Troublesome at night.* R. Solu. Morphine 3i. Syr. Bal. Tolu. 2 oz. Mix. Dose a tea-spoonful, at night on going to bed.

In the last stage of the disease the action of the instrument should be aided by the nitrate of silver, which should be ground on

- hour in a glass mortar, with loaf sugar, in the proportion of 3 grains of the nitrate of silver to 100 of sugar. About a drachm of this powder should then be put into a perfectly dry phial, holding not less than half a pint, and then shaken and instantly applied to the mouth, making at the same time a full inspiration in such a manner as to inhale the particles of powder suspended in the air contained in the phial.

Mucous disease of the throat. This disease is distinguished by hawking and expectoration, and the absence of the magnetic symptoms of tubercular disease of the throat. Besides, the throat is *always dilated* in mucous, and *contracted* in serous or tubercular disease.

The negative button should be placed on the hollow of the neck, and passes made with the positive down each side of the neck.

Give the mucous pills, 6 p., and gargle the throat morning and evening, with a strong solution of acetate of iron. See acetate iron.

Bursa Mucosa. White swellings from disease of the bursa of the joints or limbs. There is little or no pain in these cases, and they will bear pressure, and generally the full power of the machine. They are often mistaken for the common white swellings or tu-

bercular disease of the joints. The buttons should be applied directly to these swellings.

In diseases of the mucous surfaces of the organs and limbs, patients will bear fully double the power of the machine, that they will in diseases of the serous surfaces; in fact the greatest power that is borne in diseases of the serous surfaces, whether acute or chronic, will have little or no effect in acute or chronic diseases of the mucous surfaces, and this fact is sufficient to determine the true character of the disease, whether in the brain or any other part of the body.

Palsy—shaking. In these cases the positive button should be applied to the neck as in the case of rheumatism, and the other to the extremities of the affected side.

Hooping Cough. The negative button should be placed over the intervertebral spaces between the 7th cervical and 1st dorsal vertebræ, and the other over and along each side of the trachea or windpipe, from the jaws to the lower end of the sternum, or breast bone. The instrument should be graduated to a moderate power at first, and then increased as the patient will bear it.

HOOPING COUGH. R Cochineal pulv. 10 grs. Salts Tartar 30 grs. Sugar 1 oz. Hot water half a pint. Mix. Dose—a teaspoon three times a day.—*Specific.*

Acute Disease of the Mucous Surfaces.—*Bronchitis*—(acute.) This disease is distinguished by fever, cough and expectoration and the absence of the magnetic symptoms of serous disease of the lungs or pneumonia. The *negative* button should be placed over the intervertebral spaces, between the 7th and last cervical and first dorsal vertebræ, and the other moved slowly over the entire surface of the chest, under a strong power of the instrument, once, twice, or three times a day, according to the intensity of the disease, or urgency of the symptoms. Gum Amoniac, Honey, and Vinegar, makes one of the best expectorants in these cases.

• R. Gum Amoniac, 3ss: Honey, a wineglass; muriate of amonia, 3j; hot water, half a pint. Dose, a teaspoonful to a tablespoonful once in one or two hours, according to the intensity of the disease, and age of the patient.

Pripneumony.—*Notha.* With the same symptoms, affecting mostly children and old people, is acute disease of the membrane that lines the inside of the air tubes, and should be treated promptly in the manner above described, as the disease runs through its course rapidly in these cases of the young, and the aged, with feeble constitutions.

Cholera.—*Asiatic and Sporadic.* The buttons should be applied to the spine and abdo-

men in the manner indicated by the presence or absence of the magnetic symptoms, and to the cervical intervertebral spaces and limbs. The machine will reduce the spasms, and probably the inordinate discharges from the abdomen in the most prompt manner.

Croup. The buttons should be placed on each side of the larynx or upper part of the trachea or windpipe,—directly under the jaws, when the larynx will expand with great force. The negative button should then be held on one side of the larynx and passes made down the neck with the other.

Cholera Infantum. The spine should always be examined in these cases, because this disease of the mucous or inner surfaces of the stomach and intestines, is soon extended to the serous or outer surfaces, when the treatment for disease of the mucous surfaces should be changed, and the patient treated for disease of the serous surfaces, or it should be modified according to the complication of the disease in the different surfaces. The same course should be pursued in the application of the buttons. As long as there is no tenderness along the spine, the *negative* button should be placed over the spinal nerves connected with the stomach and intestines, while the other is moved over the entire surface of the abdomen; but as soon as pressure on the

ganglions of the spinal nerves in the intervertebral spaces, between the first and second or second and third dorsal connected with the stomach elicits a tenderness there, the order of the application of the buttons should be reversed, and the same course should be pursued in the application of the buttons to the spinal nerves connected with the intestines.—The excretions from these mucous surfaces in a healthy state are alkaline, but in a diseased state becomes first deficient, and then acid, indicating an alkaline treatment, which is generally found the most successful in the first stage of the disease, as magnesia—a weak solution of soda, or carbonate of potash, &c. It is soon however in many cases extended to the serous surfaces and becomes chronic, when the remedies for chronic tubercula will be indicated, and uniformly found to be specific.

Diarrhæa. When this disease is accompanied with little or no pain, the *negative* button should be applied to the spine between the 11th and 12th dorsal vertebræ and the other moved slowly over the surface of the abdomen, but when the disease is accompanied with much pain the order of the application of the buttons should be reversed, and the remedies for chronic tubercula prescribed.

DISEASES OF THE SKIN.

The buttons should be both applied and moved over the diseased surface in diseases of the skin, with a few exceptions, as in the case of the face when the positive button should be placed on the ear, or over the plexus of nerves in front of it, while the other is passed over the diseased surface.

We have used the instrument in only a few cases of disease of the skin, and these mostly cases of erysipelas, lepra, *salt rheum* and herpes. It reduces the most inveterate cases of erysipelas with great rapidity, and the effects in the others have been such as to warrant a belief, that there are very few diseases of the skin, that can long exist under the action of the machine.

 CHAPTER VI.
Admonitions.

Magnetisers should exercise the greatest caution in the use of the Rotary Magnetic Machine, for the drones of the medical profession—the old ladies in breeches, are laying in wait with their *curs* trained to pounce upon you, the moment an accident happens of any importance, in the use of this instrument. It would be of no use to plead an accident, and

the great importance of the instrument to the community; for they would drown your voice in a moment, with the noise of their *hounds*. Again, in nearly all the cases of disease, there are periods of repose, which are invariably followed by periods of excitement, or they are more or less intermittent, and the intermissions more or less complete. Now these facts are well known to the medical profession, and physicians whose principles are as loose as a bishop's sleeve, never fail to take advantage of that knowledge. Let the treatment of a case be as good as possible, and the progress of the cure never so prosperous, the moment their attention happens to be directed to it in the period of excitement, in the absence of the attending physician, they never fail to condemn the treatment—to see *clearly* that it is all wrong, or to advise a different treatment, and they will always continue to practise such impositions upon the novice, the weak and the ignorant. Magnetisers should therefore never fail to direct the attention of their patients to these changes in their sensations, in the periods of excitement and repose, to guard them against these impositions. There are cases which require medicine to quiet the system, in addition to the proper remedies for the disease, during these periods of excitement, and for this purpose the *Belladonna* will generally be

found the best and it should always be magnetized. The strong tincture should be first diluted at the rate of 10 drops of the tincture to 100 of alcohol, and then magnetized, by placing two of the silver wires accompanying the Magnetic Machine in the phial containing the dilution, and then cork it tight, with one of the wires on each side of it, to prevent their contact in the dilution. One of these wires (the longest one) is connected with the positive conductor of the machine, and the other placed in a tumbler of water, when another wire is connected with the negative conductor and with the water in the tumbler. The machine is then set in operation, and the phial taken in the right hand and shaken 100 times with the passes downwards, or towards the earth.

The power and soothing character of the medicine is greatly increased in this way, and it will retain this character a long time if kept in the shade, or from the direct rays of the sun. The dose is from one to ten drops, according to the age and condition of the patient. It should be taken in water—from a wineglass to a tumbler full, two or three times a day, either at once or at intervals, during three days, (or less, if the desired effect is obtained from it,) when the use of it should be discontinued one day, and then the use of it

resumed if necessary, and then discontinued as before, or until an itching or red spots appear on the skin, when the use of it should be discontinued. Camphorated spirit is the antidote for these symptoms, and should be diluted in water in the proportions above described, and taken in the same way if necessary. Belladonna is also one of the best articles to palliate the cough attending tubercular disease of the lungs, but when this fails, the solution of morphine should be prepared in the same way, and used in the same quantity as the Belladonna.

These periods of excitement are frequently accompanied with colds, and are sometimes produced by them, and it is a matter of great importance to these patients to have a medicine always at hand to reduce the effects of a cold at the onset; and for this purpose aconite will generally be found much the best. The strong tincture should be diluted with alcohol in the same proportion, and magnetized in the same manner as belladonna. From one to ten drops may be taken three or four times a day, according to the age and condition of the patient, well diluted with water, until the urgent symptoms or effects of the cold have subsided.

Aconite has the same effect upon local inflammation of the serous surfaces as local

bleeding, without reducing the strength of the system, and is one of the best and safest medicines that can be used in conjunction with the action of the machine, in inflammations or acute disease of the serous surfaces of the organs or limbs. There are some cases that will require other medicine, and among these is dysentery, acute cases of diarrhœa, and cholera infantum, in which soluble mercury will be found far superior to any other. One grain of the muriate of mercury (corrosive sublimate) should be first ground one hour in a ground glass mortar, with one hundred grains of sugar of milk or loaf sugar, and then 10 grains of this mixture should be ground at least one hour, with 100 grains of Sugar of milk or loaf sugar, in the same mortar,* when it will be well magnetized and ready for use. The dose is from 1 to 10 grains, according to the age and condition of the patient. One dose is very generally sufficient. It should always be dissolved in cold water, and portions of it taken at intervals of fifteen minutes or half an hour, according to the urgency of the symptoms.

Any dry medicines may be magnetized in the manner above described—observing gene-

* Every physician as well as druggists, should be furnished with a ground glass mortar. It is easily ground with sand.

rally to use from 5 to 10 grains of the less active medicines in the first trituration—fluid medicines may also be well magnetized in the manner we have described for magnetizing belladonna—observing to use a less number of drops, or less than 10 to 100 of alcohol, as the activity of the medicines increase, as in case of the sulphuric and prussic acid, &c.

The action of the Rotary Magnetic Machine not only increases the power of fluid medicines a 1000 fold by magnetizing them in the manner we have described, but magnetizing the organs or limbs, increases the power of medicines of any kind, after they are taken into the system, and consequently lessens in a great degree the necessity of large and unsafe doses of medicine. The Rotary Magnetic Machines, therefore, with their power of reducing inflammations in the most rapid manner, and of increasing the action of medicines after they have been taken into the system, lessens, in a great degree, the necessity of the use—almost indiscriminately—during the last hundred years, of the large and repeated doses of mercury—of calomel and blue pills, which has filled Europe and this country with scrofula—with hereditary disease, and with mourning; for the loss of the young, amiable and most talented portion of our race.

Costiveness is a common complaint of pa.

tients which requires the attention of Magnetizers, and in these cases the most mild aperients should be preferred, and taken at regular intervals of one or two days, and in quantities which will barely move the bowels once or twice a day. Magnetized water can be used for this purpose by those who have the machine, and will generally be sufficient for this purpose.

In this case, two tumblers of water may be placed before the machine and the wires connected with the machine and with the water, in the same manner as described for magnetizing Belladonna; no manipulations are necessary, and the water in the tumbler connected with the positive button, may be drank in a minute after the commencement of the action of the machine, to increase the action of the bowels, while the water in the tumbler connected with the negative conductor may be drank by another person to check the action of the bowels.

Setons, Issues, and the Moxa. Patients are frequently presented to us with setons and issues along the spine—caustic issues, and those made by application of the moxa, or by fire—mostly in cases of children with distortions of the spine. This is a most barbarous practice, dictated by the most savage ignorance of the true nature of the disease, and of the

proper remedies for it. It rarely if ever fails of doing great injury to the patient, and is frequently fatal. Magnetizers should therefore never fail to direct the setons to be removed, and the issues healed as soon as possible.

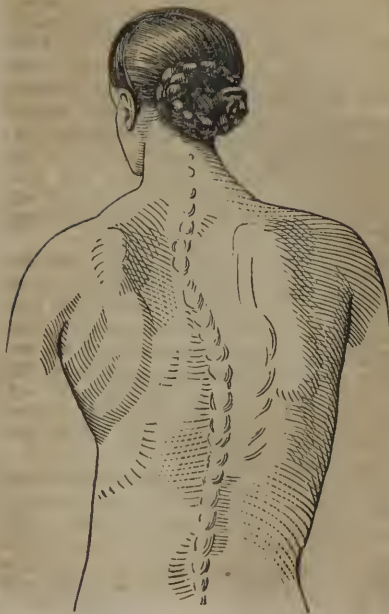
Lateral Curvatures of the Spine.

William W. Kinne, M. D., of Trumansburgh, Tompkins Co., N. Y., has been treating lateral curvatures of the spine and also distortions of the spine and of the limbs, during the last year (1846), with great success. The Doctor took plaster casts of the curvatures and distortions before he commenced the treatment, and also at different periods during its progress and at its termination. The following engraving, Fig. 1, is from a drawing by C. Muyr, of the first cast of Miss Mary B. B., of Ithaca, N. Y., aged 16 years.

The curvature commenced seven years before the cast was taken, and at the end of four and a half months thereafter, another cast was taken of Miss M. B. B., showing a very great improvement in the case, as seen in the engraving, Fig. 2, and leaving little doubt but that in a month and a half more, or six months from the time of the commencement of the treatment the spine would be straight and the form perfect.

We have also a cast of a lateral curvature, taken by the Doctor at the commencement of the treatment of Miss M. P., of Hector, N. Y., aged 17 years. The curve commenced when she was between four and five years old, and grew with her growth. The cast

FIG. 1.



shows it to be a very bad case, and the spine, at its greatest curve, an inch and a half from the median line. The second cast of this case taken after nine months' treatment shows the spine straight.

A cast of lateral curvature of the Spine, which the Doctor took of Miss M. V. S., of Ithaca, N. Y., aged 13 years, and of three years standing shows a deviation of the spine of one inch from the median line, a very bad form and poor health. Another cast taken after eight weeks' treatment of the same case shows a straight spine, improved health and a perfect form.

There was in all of these cases, like every other of lateral curvature, a contraction and thickening of the muscles or veritable white swellings on the outside of the curves. They are all cases of tubercular disease of the muscles, and it is the contractions of the muscles on the outside of the curves and consequent atrophica of those on the inside that make the deviations from the median line.

The white swelling of the right scapula or shoulder-blade in the case of Miss M. B. B., Fig. 2, which produced the deviation in her spine, is not, it will be seen, entirely reduced, and consequently the spine has not entirely resumed its natural position.

The course the Doctor adopted to reduce these curvatures, was first to reduce the white swellings with the specific remedies for tubercula, and the action of the magnetic machine, when the spines resumed their natural positions, and this is the only philosophical and only successful practice in these cases.

In consequence of the great increase of the business of reducing lateral curvatures of the spine, and distortions of the spine and limbs, Dr. Kinne has been invited to establish himself in this city, and in a letter from him a few days since (Dec. 12), he informs us that he has concluded to accept the invitation, and will have rooms in this city to accommodate his patients, in the course of the month of March next.

Distortions of the Spine and Caries of the Vertebrae

Fig. 3, is the form of a cast taken by Dr. Kinne, at the commencement of the treatment, of Almond Beach, of Cuba, Alleghany Co., N. Y., aged 13 years. The distortion commenced when he was five years old, and grew with his growth. Fig. 4, is the form of a cast taken from the boy after three months' treatment, and Fig. 5 is the form of a cast taken from the same boy after four and a half months' treatment.



FIG. 5.



There is a very great and progressive improvement in this case for the time it has been under treatment, which will astonish every physician who is unacquainted with the mag-

netic practice by which such extraordinary results are obtained.

It will be observed that the 3d figure and form of the first cast from this boy shows the most extreme atrophía of the muscles, with very great distortion of the spine, and that in figures 4 and 5 the atrophied muscles are progressively developed in the same proportion with the reduction of the distortion, and these changes have progressed in the same manner in all the cases we have treated.*

We see the same progressive changes and in the same order, in lateral curvatures of the spine, as seen on a comparison of Fig. 1 with Fig. 2, and of the other casts in our possession, before described, and these changes have also progressed in the same order in all the cases we have treated; and in all of which allopathy, homœopathy, hydropathy, chronopathy, and all other pathies, are equally and entirely at fault. And now it should be remembered, and never be forgotten, that the magnetic or duodynamic practice reduces in the most safe and prompt manner, the enlarged, thickened, swelled, hypertrophied, or tubercu-

* We have always on hand cases of distortion of the spine and caries of the vertebræ. We had 16 cases in 1844, aged from one to eight years. and they are now all well and their spines straight, excepting 2, who were too far advanced in the disease to be cured

lated portions of the organs in the same order as in the above cases of tuberculated and atrophied muscles in lateral curvatures and distortions of the spine, as we have demonstrated in the clearest manner time out of mind. Yet the professors of our medical colleges continue to teach the old antiquated astrological practice, and the people are apparently doomed to be drugged to death like their fathers, in all future time; but the study of anatomy and physiology is being introduced in our primary schools, and the manikins and magnetic machines are abroad with the lecturers on the magnetic symptoms and treatment of diseases, and the magnetizers are raising their signs in town and country, and are curing diseases in a prompt, safe and satisfactory manner. In the meantime the people are obtaining a general knowledge of anatomy, physiology, and of the magnetic symptoms and treatment of diseases, and will soon learn the professors of these colleges the necessity of keeping pace with the improvements in the practice of medicine.

Distortions of the Limbs.

Fig. 6 is the form of a cast of the lower part of the leg, foot and ankle, of a girl aged 11 years, taken by Dr. Kinne, at the commencement of the treatment; and Fig. 7 is

the form of a cast taken from the same leg, foot and ankle at the end of six weeks thereafter.

The girl used the limb many years in the



form and manner seen in Fig. 6 ; and the Doctor observes that, " in the treatment of the foot with which I presented you casts, one taken six weeks after the other, without any cutting of tendons, or other operation, we relied entirely upon the magnetic machine and frictions, to restore the action of the paralysed muscles."

Magnetizing Medicine.



In magnetising medicine with the magnetic machine, *a*, iron wires are as good as any other ; and they should be arranged as seen in the figure, when the medicine or water in the bottle, *b*, will be positive, and that in *c*, negative. See p. 89, 90.

Fever and Ague. In the cold stage of this disease the patient may hold one button in each hand, under the greatest power of the machine that can well be borne, until the chills cease, and in the hot stage they should be magnetized in the manner directed in fever. Pages 80—81. Give quinine.

Menstrual colic. Magnetise as in uterine inertia, page 67, 75. Give ergot.

Colic. Magnetize as in constipation. Give Colocynth.

Hemorrhage from the lungs. Magnetize this organ by placing the positive button over the spinal nerves connected with it, and make long passes with the negative button quickly over the chest. The hemorrhage ceases instantly as in cases of hemorrhage from the uterus, &c., &c. Give aconite.

Tubercular disease of the throat. It is distinguished by the magnetic symptoms, and the throat is thickened and *contracted*, and not *dilated*, as in mucous disease of the throat. Magnetize by placing one button in the hollow of the neck, and make passes with the other on both sides of the neck.

Dysentery. Place the negative button over the anus, and the positive over the last lumbar vertebræ, under a very moderate power of the machine, and then increase the power until the pain ceases, and repeat if the pain returns.

Suspended Animation. Magnetise the diaphragm, lungs and heart by placing the positive button over the cartilage of the seventh rib of the left side, and the other over the phrenic nerve of the left side of the neck, under the full power of the machine to restore respiration, and then magnetise the muscles as directed in page 57. The effect on respiration can be seen when the buttons are thus applied to a person in health, under a moderate power of the machine.

Asthma. Magnetise as in chronic bronchitis, p. 81-82. Dr. W. Philips cured 22 cases by this agent alone. Give the same medicines as in chronic bronchitis, p. 82. See Asthma, p. 125, 188.

Menstruation—irregular. Magnetise the ovaries, as directed in p. 54.

Hæmaturia, or bloody urine. Magnetise the cystis, or bladder, in the manner directed in p. 53.

Pleurisy. Magnetise as directed in p. 79.

Vulva.—[*Excessive irritation of*]—Wash the parts three or four times a day with a solution of muriate of mercury. R Muriate Mercury, xv grains ; Hot Water, ℥viii. Mix. Magnesia as directed in disease of the uterus, p. 54.—*Specific.*

Anæsthesia. *Loss of the sense of touch.* Magnetise the muscles, as directed in page 57-58, two or three times a day, and from half an hour to one hour each time. Give Nux.

Tubercula of the Œsophagus. Place the positive button over the first dorsal vertebra, and the negative over the upper part of the pit of the stomach.

Tubercula of the Pancreas. Place the positive button over the space between the fourth and fifth dorsal, and the negative over the lower part of the stomach, or about four or five inches below the pit of the stomach.

Tubercula of the Omentum. Place the positive button over the space between the sixth and seventh dorsal, and make passes downwards with the negative over the stomach and bowels.

Tubercula of the Peritoneum. The positive button should be placed over the space between the ninth and tenth dorsal vertebræ, and the negative moved over the painful portions of the abdomen, and repeat two or three times a day, according to the urgency of the symptoms.

Ulcerated Uterus. Tubercula of the uterus sometimes terminates in ulceration, from slight eruptions or from small tumors of the size of small peas around the neck of the uterus (see plate, page), and when from protracted disease of this organ, or from any other cause, there is reason to suspect the existence of tumors or ulcerations, the patient should be examined by a clairvoyant, who will give the required information in the most minute and accurate manner. On ascertaining the existence of these tumors or ulcerations, inject around them through the vagina a solution of the acetate of iron (see acetate of iron), morning and evening with a female syringe—give mag. gold pills, and magnetise the uterus, as directed in page 54. This treatment cures *every case*,* and such patients should *never* therefore allow physicians either to introduce conical glass tubes to ascertain by the light of a taper the state of the uterus, or to introduce and rub around it in any manner the nitrate of silver, or lunar caustic, or any other caustic; for besides the abominable indelicacy of this practice, to which few ladies will submit, the caustic makes the neck of the uterus and also the vagina as black as the evil spirit who suggested this practice, and almost always produces an impotence that is incurable.

* Cases of tuberculated uterus that have become cancerous are cured in this manner. See page 148.

MAGNETHY.

Animal Magnetism.

THE PROCESS OF MAGNETISING.

The following directions for magnetising are given by Deleuze, who practised the art more than forty years.

“When a sick person desires you to attempt to cure him by magnetism, and neither the family nor the physician makes objection to it, if you feel the desire to second his wishes, and are resolved to continue the treatment so long as it shall be necessary, settle with him the hour of the sittings, make him promise to be exact, not to limit himself to an attempt of a few days, to conform himself to your advice in relation to regimen, and not to speak of the undertaking except to persons who ought naturally to be informed of it.

“When you are once agreed, and determined to treat the thing seriously, remove from the patient all persons who would be troublesome, do not keep near you any except necessary witnesses (one only if it can be so), and

request of them not to occupy themselves at all with the process you employ, nor with the effects that follow, but to unite with you in the intention of doing good to the patient. Arrange things so as not to be too cold or too warm, so that nothing shall interfere with the freedom of your movements, and take precautions to prevent all interruption during the sitting.

“Cause your patient to sit down in the easiest position possible, and place yourself before him, on a seat a little more elevated, so that his knees may be between yours, and your feet by the side of his. Demand of him, in the first place, that he give himself up entirely, that he think of nothing, that he do not trouble himself by examining the effects which he experiences, that he banish all fear, and indulge hope, and that he be not disquieted or discouraged if the action of magnetism produces in him temporary pains.

“After you have brought yourself to a state of self-collectedness, take his thumbs between your two fingers, so that the inside of your thumbs may touch the inside of his. Remain in this situation five minutes, or until you perceive there is an equal degree of heat between your thumbs and his : that being done, you will withdraw your hands, removing them to the right and left, and waving them so that the interior surface be turned outwards, and raise them to his head ; then place them upon his two shoulders, leaving them there about a minute ; you will then draw them along the arm to the extremity of the fingers, touching lightly. You will repeat this *pass* five or six times, always turning your hands, and sweeping them off a little, before re-ascending ; you will then place your hands upon the head, hold them there a moment, and bring them down before the face, at the distance of one or two inches, as far as the pit of the stomach ; there you will let them remain about two minutes, passing the thumb along the pit of the stomach, and the other fingers down the sides. Then descend slowly along the body as far as the knees, or farther ; and, if you can conveniently, as far as the ends of the feet. You may repeat the same processes during the greater part of the sitting. You may sometimes draw nearer to the patient, so as to place

your hands behind his shoulders, descending slowly along the spine, thence to the hips, and along the thighs as far as the knees, or to the feet. After the first passes you may dispense with putting your hands upon the head, and make the succeeding passes along the arms, beginning at the shoulder, or along the body, commencing at the stomach.

"When you wish to put an end to the sitting, take care to draw towards the extremity of the hands, and towards the extremity of the feet, prolonging your passes beyond these extremities, and shaking your fingers each time. Finally, make several passes transversely before the face and also before the breast, at the distance of three or four inches; these passes are made by presenting the two hands together and briskly drawing them from each other; as if to carry off the superabundance of fluid with which the patient may be charged. You see that it is essential to magnetise, always *descending* from the head to the extremities, and never mounting from the extremities to the head. It is on this account we turn the hands obliquely when they are raised again from the feet to the head. The descending passes are magnetic, that is, they are accompanied with the intention of magnetising. The ascending movements are not. Many magnetisers shake their fingers slightly after each pass. This method, which is never injurious, is in certain cases advantageous, and for this reason it is good to get into the habit of doing it.

"When the magnetiser acts upon the patient, they are said to be in *communication* (rapport.) That is to say, we mean by the word *communication*, a peculiar and induced condition, which causes the magnetiser to exert an influence upon the patient, there being between them a communication of the vital principle.

"It is by the ends of the fingers, and especially by the thumbs, that the fluid escapes with the most activity. For this reason it is, we take the thumbs of the patient in the first place, and hold them whenever we are at rest.*

* There is a magnetic pole in each of these places,—the largest in the thumb; a fact unknown to Deleuze

"The processes I have now indicated, are the most regular and advantageous for magnetising by the long pass, but it is far from being always proper, or even possible to employ them. When a man magnetises a woman, even if it were his sister, it might not be proper to place himself before her in the manner described; and also when a patient is obliged to keep his bed, it would be impossible to make him sit, in order to sit in front of him.

"In the first case, you can place yourself by the side of the person whom you wish to magnetise. First, take the thumbs, and, the better to establish the communication, place one hand upon the stomach, and the other upon the back, then lower the two hands, opposite to each other, one down the back, and the other at a distance down the fore part of the body, one hand descending to the feet. You may magnetise the two arms, one after the other, with one hand only.

"In case the patient cannot raise himself, take your station near his bed in the most convenient manner: take his thumbs, make several passes along the arms, and if he can support himself upright, several along the back; then, not to fatigue yourself, use only one hand, placing it upon the stomach, and making longitudinal passes, at first slightly touching through the clothes, then at a distance. You can hold one hand fixed upon the knees or upon the feet, while the other is in motion. Finish by passes along the legs, and by transversal passes before the head, the breast, and the stomach, to scatter the superabundant fluid. When the communication is established, one can magnetise very well by placing himself at the foot of the patient's bed, and in front of him; then directing at that distance both hands from the head to the feet, dashing them aside after each pass, so as not to conduct the fluid to himself. I have produced somnambulism by this process, without establishing the communication by touching.

"This is what I have to say about magnetising by the long pass, with which it is always proper to commence, and to which a person may confine himself until he has a reason for employing other processes."

Magnetic Sleep.

A much greater number of persons can be put into the magnetic or mesmeric sleep under the combined influence of the rotary magnetic machine and the magnetiser, than by the common method, or that of the magnetiser alone. We have put persons into that state by the influence of the machine alone.

In the combined operation, we place the positive button in the left hand of the person to be magnetised, and take the negative button in our left hand, and then take with the other hand the right hand of the same person, under the most moderate power of the instrument.

The patient is then requested to look steadily at some small object, as the armature of the instrument, as long as the eyes can be kept open, and then to close them and go to sleep, or into the mesmeric state.

This manner of magnetising, like every other, should be practised, under the most favorable circumstances, as regards time, place and seclusion, and should be repeated every day at the same hour, until the object is effected.

When persons or patients have passed into the mesmeric state, they should be treated in the most mild and respectful manner, and if

they show symptoms of restlessness, a few passes should be made from the head, along the arms to the feet, which will quiet them, and they may then be allowed to remain in that state a few minutes or one or more hours, according to the judgment of the magnetiser, when they may be aroused in a moment, by reversing the action of the machine, or by the reversed passes, or passes with the back of the hands over the face at right angles with the median line.

Patients are sometimes clairvoyant the first time they are mesmerised, but not generally so; they will, however, tell the number of times it will be necessary to mesmerise them before they will become clairvoyant. They advance in *light* and knowledge by *degrees* in the mesmeric or somnolent state. There are six of these degrees, and six sub-degrees or steps in each degree, thus making thirty-six; and the clearness and extent of their vision, as well as of their intuitive knowledge, increases as they advance in the different degrees. There are, it appears, very few who advance higher than the third degree, or eighteen steps. A few are raised as high as the fifth degree, but these are the bounds it seems they cannot or do not pass with impunity.

These recognized degrees are described as circles of light in the form of a cone, with

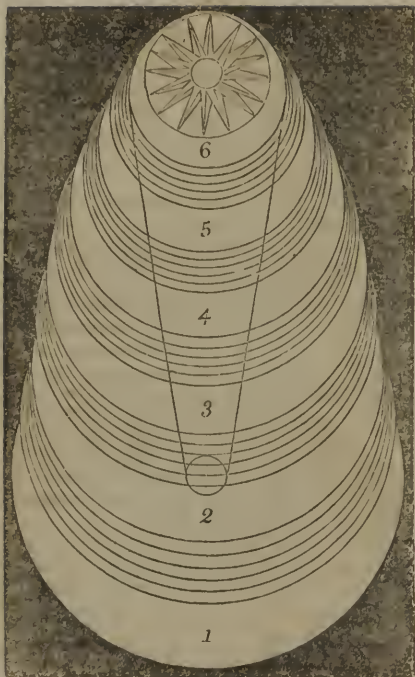
step: or degrees of less light in spiral circles, between the greater degrees of light in perfect circles—the spiral being continuous, and terminating in a disc of the most intense light in the top of the cone, as represented in the engraving. (See page 118.)

The light is represented as radiating from the disc at the top, to the bottom of the cone, and the intensity of the light is minimum in the first degree at the base, and increasing in each degree as they rise to the sixth, where it is at its maximum.

A reversed interior arrangement or inverted cone, is also described by clairvoyants, corresponding with that in the circumference, as seen by its outlines in the engraving—the great degrees of both being interspersed with rooms or apartments of light, which are probably reflections from the phrenological organs.

The first great degree of light forming the base of the cone first described, surrounds the base of the brain, while the sixth degree is mounted on its summit.

Clairvoyants have the power or faculty of increasing the diameter of the great degrees or circles of light, to an unlimited extent, for the purpose of encompassing objects, situated at great distances, and enabling them to describe with great accuracy, especially in the intense light of the higher degrees.



The light is very dim in the first degree, less so in the second, and at a medium in the third; in which degree clairvoyants see and describe very well under favorable circumstances, but are otherwise subject to great errors in their descriptions, as well as in the first and second degrees.

In raising clairvoyants to the higher degrees, magnetisers should proceed with great caution. They should first inquire about their knowledge of the degrees in the somnient state, and then of the degree they are in. If they are in one of the lower degrees, the magnetiser may then inquire whether he can raise them to the next degree. If the answer is in the affirmative, he may proceed to raise them by the exercise of his will; but if it is in the negative, the clairvoyants will, on inquiry, tell him how many times it will be necessary to magnetise them, before he can raise them to the next degree. We have great doubts of the propriety of any attempt to raise them higher than the fifth degree, even with the most perfect preparations for it; because in the present state of our knowledge they cannot be raised to the sixth degree without great danger, indeed, without the peril of their lives; and there is no real necessity for it, as the light is intense enough in the fifth degree, and there are also

sights enough that may be seen in that degree to satisfy the cravings of the most marvellous.

The phenomena of the degrees in the labyrinth we have described, as seen in the somnicient state, and about which there appears to be no reasonable doubt, is one of the most extraordinary that was ever presented to the human mind ; yet it is a perfectly simple, and beautiful magnetic arrangement, resulting from the operation of magnetising, or of giving a new and systematic magnetic form to the brain—of adding an artificial to the natural organization, in which the organization of the great pole in the centre of the brain (2) is reflected upon its surface, and from thence into infinite space.

The poles of all the other organs are organized in a similar manner as seen in the somnicient state ; that is, they are organized with circles at right angles with their radiations, like those seen on the summit of the labyrinth, and some clairvoyants see through those of the stomach. Besides the concurrent testimony of clairvoyants on the organization of magnetic poles, it is found on a comparison of our previous knowledge on this subject, that their descriptions agree exactly, as far as our knowledge extends. We were well acquainted with the radiations, with the circles at right angles with

them—with their light, and with their spirals, circles and inverted cones; and could not, therefore, fail to recognize in these descriptions, a magnetic organization.

Those who are unaccustomed to magnetic phenomena, however, find great difficulty in reconciling with their preconceived notions, the possibility of persons being able to see, and thereby distinguish, objects through any other medium than that of external light, and by means of the ordinary functions of vision. The idea of *any* light, except that which comes from external objects, seems to be regarded as unphilosophical, if not assumptive of the supernatural, although an easy and palpable demonstration of the fact is, at all times, within the reach of the most sceptical and supercilious. Let the doubter and sneerer simply close his eyes, so as to exclude all external light, retiring, if he please, into a perfectly dark room where not a ray exists, and on pressing his fingers on his eye-balls, he will *see*, without that mechanism of the eye which is essential to external vision, several distinct and concentric rings of light, around a central point of still greater brilliancy. And though he be afflicted with blindness towards external things, this power of internal vision will be in nowise impaired. The light thus seen is magnetic, being elicited

ed from the two poles, of opposite denominations, which belong to the crystalline lens; and is doubtless of the same character as that which is affirmed by clairvoyants to exist in the brain, the heart, the cervical glands, the kidneys and other organs, and by which, in fact, they are enabled to trace the whole magnetic organization of the human system. With the intense luminosity of the magnetic forces when in atmospheric combustion, every one is familiar; and we have now furnished an example, at least equally familiar, in which this luminosity is as independent of atmosphere, as it is distinct from every other kind of light. In short, every one can see for himself precisely the same kind of light that is beheld by clairvoyants in the mesmeric state.

The internal organization of the pole in the centre of the brain, as disclosed in the somniscient state, is, however, the subject of the greatest interest; for the interior inverted cone, described by clairvoyants, is the magnetic miniature *germ* of the form of the brain. The heart, lungs, stomach, and other organs, as well as the limbs, have magnetic miniature germs of their organizations, which are varied, according to the variations in the forms of the organs and limbs, as seen by clairvoyants. These organizations are also

seen to be connected together by magnetic axes and interlacings, irrespective of the organization of the nervous system, and constitute a perfect magnetic, spiritual, or immaterial form, corresponding with that which is material. They are purely spiritual forms, connected with, or inclosed in, those that are material, and according to the concurrent testimony of clairvoyants, these spiritual forms are raised in all the beauty of their earthly tenements, like the spiritual forms of the rose.

The germs, with which the human system was formed and perpetuated, are, therefore, magnetic or immaterial forms, inclosed in those that are material; and according to the same concurrent testimony, the entire animal and vegetable kingdoms were formed, and perpetuated in the same manner. Hence we infer a corresponding cosmogony of the solar system, and of the stars in the heavens.

Light and Images of the Degrees.

In the first degree and first state of magnetic sleep, the light is a pale blue.*

In the second degree and second state, the

* They change from the natural to higher states, as they enter in and advance in the degrees.

light is a little stronger, and a little deeper blue.

In the third state, these sleepers are fully under magnetic influence, and the light a clear sky-blue. They see objects in a straight or direct line, through the magnetic medium in space, but not comprehensively, or inclosing various objects as in the natural state.

In the fourth degree and fourth state, the light is stronger, and extends farther than in the lower degrees. Persons with moral organs largely developed, are disposed to see immaterial or spiritual objects in this degree.

In the fifth degree and fifth state, the light is still more intense, and clairvoyants less inclined to view or take cognizance of natural, external or material objects, but disposed to remain in this exalted state.

In the sixth degree and sixth state, the *tendency* of going into it is instant death, and should be most cautiously avoided.

In the first *state* of magnetic sleep, persons retain more or less of their intellectual faculties, and are more or less susceptible to external influence.

In the second state the paralysis of the muscles, and the insensibility of the skin is complete—the natural sight lost, the hearing more or less impaired, and a muscular attraction established.

In the third state a strong sympathy is established between the mind of the subject and the magnetiser—the mind of the former being under the control of the latter.

In the fourth state the mind of the clairvoyant soars far above that of the magnetiser, and becomes free and independent.

These phenomena are the consequence of reversing the natural order of the magnetic or spiritual organization of the body. The negative and insensible forces connected with the inner or mucous membranes or surfaces, and motor nerves, are attracted to the outer or serous membranes, and nerves of sensation, while the positive and sensitive forces in these external surfaces are repelled to the inner or mucous membranes and surfaces, and hence the cause of this reversed order of sensibility and insensibility of the opposite or serous and mucous surfaces

In passing into the magnetic state, a person feels a disposition to sleep, and then a pricking sensation in the skin, followed by a general numbness—the natural light fading, when perfect darkness ensues. A glimmering of magnetic light then begins to appear, when a shock ensues, followed by a blaze of light, consciousness and clairvoyance.

Insensibility in Magnetic Sleep.

Among the extraordinary phenomena of magnetic sleep, is the insensibility of the skin, or external surface of the body often induced, and the establishment of an exaltation of sensibility in the mucous or internal surfaces, in which the natural order of the magnetism of the human system is reversed.

Now, the magnetiser reverses this order unconsciously, in the process of magnetising, by repelling the positive forces from the sur-



face to the centre, and attracting the negative forces to the surface, and this reversal of the order of the magnetism of bodies is according to a law of these forces, and is therefore founded in nature, and easily imitated.

If a round iron, or steel plate, or disc, with a hole in the centre, representing a middle horizontal section of the body, is placed on the positive pole of a Galvanic Battery, under a moderate power, it presents the phenomena represented in the first, or preceding figure : or



a negative internal, and a positive external surface ; but if we now place the plate on the negative pole of the same battery, the order of the magnetism of the plate will be reversed, as represented in the second figure : showing in the first figure the natural order of the magnetism of the body, and in the second, the induced order, in the magnetic state.

Paralysis in Magnetic Sleep.

On a Sunday evening in August, 1845, a young woman, named Emma W——, about 24 years of age, who had long been a Clairvoyant, and who had at length acquired the power of putting herself into the magnetic sleep, without the aid of a magnetizer, was at the office of the Author of this work, during his absence on professional duties, awaiting his return. A friend of his who was also staying to see him, thinking this a good opportunity to elicit the phenomena of clairvoyance with less liability of interruption than might have been afforded on a business day, requested the lady to put herself into that state, and inform him concerning the the nature of the luminous atmosphere, spots and opaque body of the sun. She replied that she feared it was rather a dangerous experiment, and had heard of several clairvoyants who had suffered severely in attempting it. She nevertheless consented, saying that she would endeavor not to venture too far.

In the course of five or six minutes, she manifested all the usual symptoms of a complete magnetic sleep, and apprised her interrogator, with some slight degree of irresolution, that she was ready to attempt an inspection of the solar orb. Shortly afterwards,

she evinced a highly nervous shrinking, as if from a sense of awe, and said, in answer to an inquiry, that she felt the solar influence to be too powerful for her to persist, and was afraid she would lose her senses—in her own words she feared “that her whole mind would be consumed.” She was accordingly requested to venture no farther, but remain if possible, in the position she had acquired, and describe what she saw. She then said that she had now a view of the dark body of the sun—that it was black, but highly lustrous, like “black shining melted metal;” she was confident it was highly metallic, though she could look at it no longer, as it was again closing up in a degree of brightness which she could not endure.

Whilst obtaining these answers, the gentleman in communication with her, perceived that her left arm was greatly paralyzed, and the hand became so tightly clenched that he could with difficulty rescue his fingers from the painful grasp. Speedily she announced that she was absolutely paralyzed on the whole of her left side, and was fearful that she would be convulsed all over. She added that “if she had continued so near the sun a minute longer, the influence would have killed her;” and, as it was, she knew not how she could recover from the convul-

sions she felt approaching, unless some powerful magnetiser could be obtained to awaken her. Shortly after this, her convulsions became so violent and alarming, as to induce the gentleman who was with her to call for assistance to hold her in the chair. She became unable to speak or hear; she breathed only at long intervals with great labor: her right hand was kept so forcibly on her heart, that it could not be moved with the united strength of two or three persons; and the action of the heart itself, seemed to be entirely suspended. The pulse were frightfully intermittent, and for long intervals, wholly imperceptible; the eyes were open, with the pupils half buried beneath the lower lids, and greatly dilated.

In this state, varied only by convulsive paroxysms of greater or less intensity, she continued nearly four hours, when the writer, who had been detained much beyond the usual time, returned. He found her surrounded by his family and medical assistants, together with a magnetiser and a male clairvoyant who had been sent for to relieve her. Their efforts however, had produced only slight and transient effects in mitigating her condition, and we now judged it proper to attempt to establish a communication with her, as the only means of awakening her, and

with this view, commenced making the long magnetic passes, and then reversed them. The effect of these was very striking, even from the first: producing sudden starts, followed by greater freedom of respiration, and some degree of relaxation of the muscles. The male clairvoyant present being in a magnetic state, recommended that as soon as her arms became sufficiently relaxed, her hands should be kept in a basin of cold water, and the passes continued; adding that under this process she would awake in twenty-five minutes, although it would require a much longer time for her to recover from what he described as her "rash attempt," the effects of which upon her brain and nervous system he minutely and lucidly described.

As soon as her hands could be placed in the water, several watches were observed, and the assigned twenty-five minutes curiously awaited by the spectators. Precisely at the end of this period, she awoke and spoke, her whole left side, however, which had first been attacked, still remaining perfectly paralyzed, not excepting even the left arm which had been so directed as to reach the basin of water. To remove this state of paralysis, the writer found it necessary to resort to the Magnetic Machine. It was used three times a day, and on the third day the paralysis dis-

appeared, and she was able to return to her home.

We publish this case as a caution to magnetisers and clairvoyants against gratifying the curiosity, so frequently evinced by persons ignorant of the dangerous nature of the experiment, of instituting clairvoyant explorations of the sun. This is but one out of many well authenticated instances which we might report, in which the attempt has nearly proved fatal. The planets, however, may be, and frequently are, examined by good clairvoyants, with perfect safety and success.

The following communication is from the Rev Samuel Griswold, of Lyme, Ct., a very accurate observer, and a very powerful mesmeriser.

Polarity of the Human Hand.

To the Editor of the N. Y. Dissector :

Some facts were presented, in an early number of the Dissector, in proof of the Polarity of the human hand. During the last two years I have frequently tried experiments illustrating the same truth.

1. The following is a pretty experiment, and may be tried by those, who do not understand the process of inducing the somnolent state by Animal Magnetism.

Place together the ends of the thumb and of all the fingers of your right hand, so that they will all touch at once any flat surface as a table. The Magnetic currents from the poles in the ends of the thumb and of the fingers will thus be made to concentrate their influence on a comparatively small surface. Let a second person hold the palm of his left hand, upward and horizontally,—bringing the elbow opposite the side, at a little distance from it; being careful not to rest his hand or arm on any part of himself or other object. Then bring your concentrated thumb and fingers over the centre of the palm of his hand (the location of the large pole), holding it for some time, an inch, or half an inch distant from it. A sensation of warmth will be felt, if both the experimentors are right handed, or both left handed, and both in their normal magnetic state. This warmth is occasioned by the union of negative force in your right hand, with the positive force in his left hand, on the principle that magnetic forces of opposite denominations, on being united, attract and contract, consequently expel heat.

Next bring the thumb and fingers of your right hand over the right hand of the other person in same manner as in the first experiment; and a sensation of cold, like a very

slight breeze, will be produced by the two forces,—on the principle that magnetic forces of the same denomination, on being united, repel and expand—consequently absorb heat, and cause the sensation of cold.

If you next hold your left hand over the right hand of the other person, and then over his left—both being placed as in the former experiments, you will obtain the same results.

I have frequently discovered, by this experiment, that persons were left-handed, as the warm sensation was produced by bringing nearly together both of our right hands, or both of our left hands; and the cold sensation by the near approximation of the right hand of one to the left hand of the other.

The negative force, being stronger than the positive, will be found on the right side of persons who are right handed; and on the left side of those who are left-handed.

In both these cases the normal state may be reversed by local injuries or partial paralysis of the stronger side.

Many persons have not sufficient susceptibility to magnetic impressions, to perceive these sensations. In some cases, also, it will require considerable time for the magnetic communication to be established between the two experimentors.

Many, who have stoutly professed their disbelief in Animal Magnetism, or even ridiculed it as a humbug, have honestly declared to me, that they very distinctly perceived both the warm and cold sensations in the foregoing experiment. But their disavowal cut them off from any possible source of explanation of the phenomena produced.

2. Another proof of the opposite polarity of the two hands, I have often deduced from the somnicient subject.

Care was taken not to disturb the polarity of either side by cross manipulations. When the subject was declared, by himself, to be in the magnetic sleep, I have crossed my arms, so that my right hand came in contact with his right hand, and my left with his left, and have often been surprised by the marked effect. I have often tried this experiment with C. M. R., a young lady of delicate constitution and magnetic sensibility, whom I have magnetized for her health. When in the somnicient state, I have often touched her right hand with my right hand, which gave her a powerful shock, attended with an unpleasant sensation. Even one finger produced this shock. If I took hold of her right hand with my right, and her left hand with my left, she would manifest great uneasiness, and im-

mediately change her hands, taking my right hand with her left, and my left with her right. Other somnicients, less sensitive, have perceived a different influence from my two hands when applied to either of their hands; and have often directed how the two hands should be placed in reference to their opposite polarity.

Influence in Remedial Applications.

A knowledge of the distinct polarity of each hand, yea, of the whole side, is of great practical importance in the application of the remedial influences of Animal Magnetism.

1. In producing Clairvoyance, great care should be used not to disturb the polarity of the two sides of the subject, otherwise much confusion may be produced.

2. Local inflammations may be removed by applying the repulsive and cooling influence to the diseased or injured part.

While in your office, more than a year ago, with Dr. ———, of strong, healthy constitution, had a painful sensation and some inflammation in his *right* eye, produced, if I rightly remember, by a small particle of sulphate of copper. I applied the fingers of my *right* hand, held at a little distance from his eye; and he immediately felt

the cooling sensation, mentioned in the foregoing experiments; and very speedily both the pain and inflammation were removed.

3. Your directions for magnetizing with your magnetic machine, are equally applicable to the appliance of Animal Magnetism. The right hand corresponds to the negative button, and the left hand to the positive button. In magnetizing for diseases of the organs, the right hand should generally be placed on the spine opposite the organ diseased, and the left hand over the place where the pain is felt.

4. Your diagrams and explanations of the poles in the brain and in the internal organs, are of very great importance to those who magnetize for disease.

Your much obliged friend,

SAMUEL GRISWOLD.

Lyme, Ct., Feb.

Magnetic Light and Magnetic Poles.

In Magnetizing with the vibratory magnetic machine, we become familiar with magnetic light—with its color, and intensity, &c. Its color is that of the sun, and its intensity increases from the smallest glimmering to the greatest brilliancy, with the *increase of the strength of the poles* in the magnet and piston, and consequently with the power of the instrument. This light does not emanate from a process of combustion requiring oxygen to support it, but is equally brilliant when enveloped in water, or in an exhausted receiver, and is the light which is seen by clairvoyants to issue with the greatest intensity from the poles of magnets, and the poles of the organs and muscles, &c. Clairvoyants see with the light which emanates from the great pole in the centre of the brain, and they see the internal parts of animals, and of the human body, lighted up with the light from the poles of the organs and muscles, &c.

The organs and muscles are thus seen in the most clear and distinct manner in their healthy state, but when they are diseased, the light becomes dim in proportion to the intensity of the disease, and in some extreme cases becomes extinct in an organ or limb, with the strength of their poles, according to the concurrent testimony of clairvoyants, and the fact

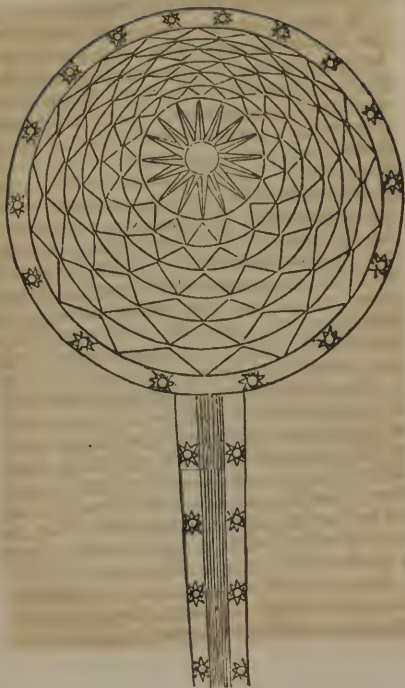
that these organs and limbs are feeble, in proportion to the decrease of light, and are paralysed when it is extinct, is strongly confirmatory of this testimony.

There is a great difference in the size of these poles. The largest in the human system is that in the centre of the brain, and is of course of the first magnitude. There is one in the hollow of each foot, of the second magnitude, and one in the palm of each hand, of the third. Those in the organs of casuality, and amateness—in the lungs, heart, stomach, kidneys, testicles, ovaries, and vagina, are of the fourth magnitude.—Those in the liver, spleen, pancreas, solar plexus, uterus, and ileo-cæcal valve are of the fifth magnitude. Those in the joints of the limbs are of the sixth, and those in the eyes, in the phrenological organs, ganglions, of the spinal nerves, and in the angles, or convolutions of the intestines, of the seventh magnitude, and those in the skin of the eighth magnitude.

These poles in the organs, joints, muscles and skin, &c., show radiations from a centre or nidus, like those from the poles of magnets, and are, like them, connected with magnetic axes and interlacings, and thus make a magnetic or spiritual form, like the human form, on which matter is laid in the construction of the human system. These poles are

endowed with motion, power, light, sensation, inclination, and consciousness, as is seen and demonstrated in the clearest manner.

The following engraving is intended to present a view of the great pole in the centre of the brain, as seen by clairvoyants. It occupies the whole space between the circle of small poles of the phrenological organs. It is very light, especially the nidus in the centre and summit, which has the same intensity as the sun, and is always in motion, excepting in natural sleep, when it is in a quiescent state. The form in a situation corresponding to that of the spinal marrow, A is a continuation of the nidus, or nest of magnetic forms, and the small poles on each side, are those of the ganglions of the posterior spinal nerves in the intervertebral spaces, which gives them sensation. This great pole is surrounded with six great circles, and six small, intermediate circles of light, and the other large poles, from the first to the fourth magnitude, are surrounded with a certain number of similar circles of light, as those of the lungs, heart, and stomach, &c.



Clairvoyant Powers.

A great difference in the clairvoyant powers of different persons in the magnetic state has often been noticed, and is the consequence of various causes. Among these is a difference in the organization of the brain—in the phrenological organs, and in the relative quantity of grey or cortical substance around these organs. Besides, some are in the lower or first, second, or third degrees, while others have been raised to the fourth, or fifth degrees. Another cause of difference is that of a difference in their education ; and another, that of the *minds*, and theories of their magnetisers, or those who conduct the examinations of the different subjects presented to them, and this last cause of difference may often produce the most discordant results.

The only manner of obviating these differences in the cases that are remediable, is to educate them, or at least to give them a general knowledge of the arts or sciences to which their attentions or business, as clairvoyants, is mostly devoted, and this object is easily affected by teaching them in the magnetic state, as they remember when in it, and rarely forget what they once learn in that state.

Those devoted to the practice of medicine, should be taught anatomy, physiology, and magnetism, with the magnetic organization of

the human system, and the two great divisions of diseases, or those of the serous and mucous surfaces, and their magnetic or duodynamic treatment, or with the magnetic machine and magnetised medicines. And this is a matter of great importance, as there is no longer any doubt that the effects of medicine, whatever they may be, is the consequence of the action, of imponderable, or imperceptible agents condensed in them, upon the nervous, spiritual, or magnetic organization of the system.

Besides the common clairvoyants who literally see things as they appear to them in their natural state, and besides, have intuitions of the past and future, there are others who do not see literally, but have impressions more or less vivid, that things or objects appear, and are as they describe them. Jackson Davis is an example, or one of those who have impressions, instead of literal sight in the magnetic state, and we know other examples of the same kind in this city. Some few clairvoyants recollect in their natural state, very distinctly, many of the objects they see in the magnetic state, and some of the impressionists recollect, in the natural state, many of their impressions in the magnetic state, and on a full investigation of the subject, there appears to be no doubt but clairvoyants see lite-

rally, and the impressionists have impressions or intuitions common to both, without literal sight, or clairvoyance.*

The present, past, and future knowledge daily displayed by a great many persons in the magnetic state, leaves no room to doubt but they have an intuitive knowledge in that state, which is more or less perfect, besides the knowledge they obtain from literal sight or clairvoyance, and the evidences on this subject having been frequently described, and often observed by a great number of the most intelligent persons in almost every community, it is deemed a useless task to enumerate them here. It would also be useless to enumerate the evidences of the great superiority of clairvoyants to mere impressionists, as it must be self-evident to every sane mind; besides the lucidity and accuracy of the former, and the illusions and phantasies often displayed by the latter are proverbial.

On an examination of the subject of these intuitions, or of immediate knowledge without the deductions of reason, they are plainly seen to be the natural emanations from the

* We recollect, distinctly, many objects we see in the magnetic state and know that we see them literally as we do with our eyes in the natural waking state and we have been in the habit of thus seeing them during the last ten years, and cannot possibly be mistaken.

exalted organs of the magnetised brain, and not from supernatural agency, as suggested by the marvellous. They are not, in fact, confined to persons in the magnetic state, but are common to many persons in the natural waking state, numerous examples of which are familiar to persons of observation.

Clairvoyant Examinations of Diseases.

There is rarely any thing presented to the mind of a physician which is so unintelligible as the reported examinations of diseases by clairvoyants when those examinations have been conducted by persons who have little or no knowledge of diseases, anatomy or physiology, and they are consequently unable to form an opinion of the good or bad effects that may be expected from the prescriptions of clairvoyants in such cases, yet it is the opinion of many well-informed persons, that these prescriptions are generally more successful than those of the best physicians. When, however, these examinations are conducted by physicians, they are generally very satisfactory, and in a great variety of cases are very useful, and in many others indispensable to forming a true diagnosis as well as a correct prognosis of diseases. The prescriptions of clairvoyants under such cir-

cumstances are generally well understood, and their value duly appreciated. As an example, we may refer to the cases of deafness, the causes of which in any given case is almost always unknown, and would always remain so, without a clairvoyant or post mortem examination. The eustation, or auditory tube, through which the sound passes from the ear to the throat, may be obstructed by hardened wax, by tuberculations, or by false membranes, or the deafness may be the consequence of paralysis (more or less complete), of the auditory nerve. Now it is easy to be seen that the treatment, to be successful, must be different in each case, for the hardened wax must be removed, or melted with steam, the tuberculations must be reduced with the remedies for tubercula, the false membranes must be broken up with an instrument, and the paralysis must be removed by the remedies for inucosis or atrophia, including the action of the magnetic machine, and hence the great importance of clairvoyant examinations in these cases.

Although we can determine in an instant the character of the disease of an organ or limb by the magnetic symptoms, yet we cannot always tell how far the disease has advanced, whether it is curable, or too late to be cured without a clairvoyant examination,

and this is often a matter of great importance. It is also often a matter of great importance to observe by clairvoyance the changes that occur in the appearance of a disease during the process of cure from changes of temperature, from colds, and from various other causes. Clairvoyance is also a matter of great importance to females—in diseases peculiar to their sex, and in enabling ladies to avoid the most revolting examinations with the most perfect safety, and with credit to themselves and their families. Besides the examination of patients when they are present, clairvoyants examine patients at great distances from them, and in fact in any part of the world, and generally with the same accuracy as if they were present. It is the magnetic forms, or *spirits* of these clairvoyants that travel over any part of the world, and are present with those patients when they examine them. We know that their spirits travel, and are present with the patients in these examinations, from the fact that the full exercise of all their senses while travelling to different places, and during the examinations of these patients. They see the country and towns they pass through, feel the changes in temperature and climate, hear any uncommon or strange sounds, as the blowing of horns, the noise of steamboats, or the roaring of the falls of Niagara, &c. ;

notice uncommonly pleasant or disagreeable odors, visit places of amusement, and have a sense of fatigue, hunger, and thirst. Besides, if one of these patients have a paralysed limb, a corresponding limb of the clairvoyant becomes paralysed the same as if the patient was present and having hold of the hand of the clairvoyant. Such are the well ascertained facts, and such is the evidence on this subject, which is deemed perfectly conclusive, no matter how extraordinary it may appear to those who are not initiated into the mysteries of the magnetism of the human system.*

When clairvoyants are tired, unable or unwilling to travel to the places where patients reside, the magnetisers can direct the magnetic forms, or *spirits* of these patients to appear before them, when *they do so appear* with their diseases, and in the proper form and dress, or costume of these patients where they are examined with the same accuracy they are under the other circumstances before described, and are then directed to return to their several places of abode, when they soon disappear. Such are the well-ascertained

* The magnetisers must always conduct the clairvoyants home before they demagnetise, or wake them, but if they should forget to do so, they must magnetise them again, and then conduct them home.

facts in these cases, and such is the power of the human will.*

We have been engaged in the examination of patients by clairvoyants about four years, and in the daily practise of it during the last two years, and have during all this time, examined a great many hundred cases, and cannot possibly be mistaken in any of the facts above mentioned.

The great and universal accuracy of these examinations has uniformly elicited the most flattering commendations, as well from persons residing at great distances as from those of this city and vicinity, and among these there are many who rank with those of the highest order of intellect. The results of these examinations, with the success of the practice founded upon them, has so increased our correspondence as to make it a matter of some importance to us in the saving of labor, to explain these mysteries in this work for the benefit of our correspondents, and to enable them to furnish us with the means for exam-

* The magnetiser must always be careful to direct the spirit of the patient to return to its place of abode, and see that it departs before he demagnetises or wakes the clairvoyant. but if he should forget to do so, he will soon learn his mistake, as the clairvoyant will probably be very much frightened, and may go into convulsions, and he should therefore magnetise the clairvoyant again as soon as possible.

ining patients at great distances with great facility, or in the shortest time.

Examinations of Patients at Great Distances. †

When we wish to examine a patient residing at a great distance from us, we can put a person present who has been at the abode of such patient in communication with the clairvoyant, and direct that person to conduct the clairvoyant to the patient, or in the absence of such person, we can place a letter from the patient, or from a person in the family of the patient, in the hands of the clairvoyant, with directions to find the patient, when a light starts off in the form of the great pole in the centre of the brain with its train of small poles,* followed by the spirit of the clairvoyant, which sees a narrow strip of country, or of water, when passing over it, and in passing through the streets of towns and cities, often see the houses on either side of a street by its guiding light shining upon them. After having found and examined the patient, it returns home in the same manner, and enters into its place of abode. Such is the concurrent testimony of clairvoyants, and such are the extraordinary facts.

We are aware that it may be said that the constant presence of the spirit of the clairvoy-

* See cut on page 35.

ant is necessary to maintain life, and as the clairvoyant does not die, the spirit does not travel in the manner described, because it is impossible for it to be in two places at the same time. It should, however, be remembered that the clairvoyant was magnetised (no matter how), and that to magnetise a body is to make a magnetic form or spirit in that body, as is easily demonstrated, and this spirit may and does maintain the body of the clairvoyant in a healthy state in the absence of its own spirit.

As the examinations of patients in the manner above described is a legitimate business of great importance to the community, it should not be mixed up with and degraded with vain experiments that are foreign to it, and injurious to the sight of clairvoyants. They should not therefore be required to answer questions on the subject of such experiments, but should leave them for the solution of the clairvoyants of private parties.

In finding and examining patients with a letter, every facility should be afforded by the patient, or friend of the patient residing in the same house, where the letter should be written, as the spirit of the clairvoyant will always go directly to that house. The spine of the patient should be examined in the manner described in "The Motive Power of the Hu-

man System," page 43, and the result stated in the letter; and besides if there are any swellings of the joints, limbs, or any other part of the body, or any ulcerations, they should be mentioned, as they might be overlooked in the examination.

If there is any pain or tenderness from pressure along the spine, we shall know that it is a case of tubercula, and if the number and situation of the painful or tender spots are stated as near as may be, we shall know if the spirit found the patient, or some other person, and if some other person, we can direct the continuation of the search until the patient is found.

If on examination there is no tenderness found along the spine of the patient, it should be so stated, when we shall know it is a case of mucosis or mucous disease, but we should not know what organ was diseased, and it should consequently be mentioned in the letter *

On having the information we have described, which is easily furnished, we can easily know by means of clairvoyance, how far the disease has advanced in each case, and whether they are curable or incurable, or as well

* There are about fifty cases of tubercula to one of mucosis.

as we could if we had the body of the person open before us. All the cases are curable in the first stages of the disease, and about ninety-five out of every hundred in the last stage, including tubercular consumption and white swellings of the joints and limbs, as we have demonstrated in the clearest manner, and we shall continue to undertake the cure of the curable cases presented to us for that purpose, and have the fullest confidence that with the means in our power, we shall continue to cure chronic diseases in the above mentioned proportion to the whole number of cases.

Such is the result of the duodynamic or magnetic practice. Now it is well known to those who are initiated into the mysteries of the practice of medicine, that there is not more than about five per cent., or five cured out of every hundred cases of chronic diseases, by the old astrological or common practice, and the number of cures out of every hundred by the Homœopathic practice is about the same, or five or six out of every hundred cases.

The remedies we use* in these cases are

* Temporary remedies, as bleeding, blistering, emetics, cathartics, low diet, &c., &c., are prescribed by allopathists, or old school physicians, and aconite, bryonia, rhustox. belladonna, &c., by the homœopaths in acute or inflammatory diseases, which produce sudden derangements in the system, and run through their course in a few days or a few weeks, and these prescriptions are often necessarily and very

magnetic and specific, and are perfectly safe for

properly changed every day, or every one, two or three weeks; when the disease has run through its course, and the patient either cured, dead, or the disease has become chronic; but no man who deserves the name of a physician ever prescribes in this manner to cure chronic diseases, which come on very slowly, and gradually changes the old, and forms new parasitic, or other unnatural structures, as tubercles, and white swellings of the serous and mucous surfaces, &c., as the plainest common sense would, and does teach him to learn and prescribe the specific remedies that will act slowly and safely on the old and natural forms of the system, and gradually reduce in a few months or more, the parasitic or other unnatural structures, and thus restore the general health. Nothing, therefore, so much distinguishes the accomplished physician as the readiness with which he distinguishes and prescribes for acute and chronic diseases, and on the contrary there is nothing that so much distinguishes the ass or ignoramus as the frequent changes in his prescriptions, in chronic as in acute diseases, and these rules are arbitrary and admit of no exceptions, and are equally applicable to physicians and *clairvoyants*. When, therefore, reputed *clairvoyants* change their prescriptions in chronic as in acute diseases, or even once in 3, 4, 5, or 6 weeks, it is conclusive evidence that they have no clairvoyance on the subject, but are governed by impressions transferred from the brain of some miscellaneous personage, and these impressionists may also be known by the miscellaneous character of their prescriptions in chronic diseases, as "catnip, sage, isip, and pond lily—white pine and wild cherry bark, squaw-vine, golden seal and spikenard—cohosh, skunk-cabbage, prickley-ash, vervain crowsfoot, and Solomon's seal," &c.

Now such prescriptions of reputed *clairvoyants*, are not only legitimate sources of amusement to physicians, but they have a strong tendency to make new and confirm old skeptics in their skepticism.

persons of all ages and conditions, and are forwarded to any part of the Union and the Canadas, by mail, express, or otherwise, according to order, free of postage or expense, with full directions for their use.

When it is known that our time is necessarily occupied every day, from morning until night, with the examination of patients by clairvoyance and otherwise, in our office, or in this city, and that we are consequently compelled to examine patients at great distances in the evening, it is hoped and believed that such patients and their friends will reflect upon our situation and have so much mercy upon us as to give us as much information* in regard to each case (no matter what it is),

* This information is for us, and not for the clairvoyant (who does not read the letters), and is for the benefit of the patient; yet some of these patients are so very cautious of their information in regard to their cases, as to make it difficult, if not impossible, to find them. In a case of this kind, in which the gentleman only gave me his name and place of residence, the clairvoyant found three or four men in the house, and was consequently unable to distinguish the patient with certainty, and on informing him of this fact, he says in his answer of "Jan. 15. 1847: Your letter of the 8th of January was received yesterday. The statement of your clairvoyant concerning the three or four men here was true. My brother and brother-in-law live in the house with me at present. I should have written you more about my case, but I was informed that the name and place of residence of the patient was all that was required. I will now try to give a few particulars," &c.

as to enable us to distinguish and find the patient with as little delay as possible, so that we may get through with the examinations of such cases in time, each night, to have some rest from our labors.

It may also be useful to observe here that the examinations of the letters from patients is conducted in the most secluded and confidential manner, and the notes of the clairvoyant examinations of the cases taken down at the time of such examinations, and the letters answered as soon thereafter as possible.

The clairvoyant will visit and re-examine these patients under our direction, once in four or five weeks, and as she always recollects the previous examinations and compares them with the last, it is a matter of great importance in enabling us to know the progress of the cure in each case, and to correspond with any patient on the subject, if it should become necessary to do so.

In the meantime patients should communicate to us freely any information supposed to be overlooked or unknown to us, and deemed of great importance in the successful treatment of any particular case.

We shall employ a clairvoyant of the greatest power, and of a high order of intellect for the examination of patients at home or abroad, who will often give our patients fine speci-

mens of the all-seeing eyes and spiritual powers of the magnetized brain.

The following is a specimen of Clairvoyance which occurred a few evenings since. When we had got through with the examination of letters from patients, on the evening of the 8th inst., and about 8 o'clock, we requested the clairvoyant to look and see if there was any money coming on the way in the mails for us, and in two or three minutes, she answered yes! I see a fifty dollar bill for you in a letter, and the letter is in a bag coming from the west. Are you not mistaken in the amount? No, it is fifty, but it is not a bill, but a draft. Look and see if it is not 70 instead of 50 dollars. No, it is 50. Why, how fast it comes!—whiz!—it is coming on the railroad! The cars arrived here between 10 and 11 P. M.

We were expecting a draft from New Orleans of 70 dollars, but instead of that, our clerk on returning from the post-office on the morning of the 9th inst., brought us a letter from a gentleman in Pittsburg, inclosing a draft for 50 dollars.

On the evening of the 10th inst., after having again got through with the examination of letters from patients, I directed the attention of the clairvoyant to the subject of the above draft, and inquired whether she knew from

mere intuition it was a draft of 50 dollars for me, and coming in the mail on the railroad from the west, or saw it literally? When she answered that she saw it literally, as she saw things with her eyes in her natural waking state.

CASES.

The magnetic symptoms and duodynamic treatment of diseases, and the old astrological symptoms and treatment.

Mrs. L. aged 29 years and of good constitution; we examined the case of this lady, May 22d 1844, and found a great tenderness on pressing on the cervical ganglions in the intervertebral spaces, and on the dorsal, connected with the stomach and liver; showing it to be a case of tubercular disease of the muscles, stomach and liver, and pronounced it such. But "Are not my lungs diseased?" enquired the lady. "No they are not, for there is no tenderness felt on pressing on the ganglions of the spinal nerves connected with the lungs, and you have no cough, have you?" "No, I have no cough, but I have a great deal of pain in my chest." "Is the pain in the inside or outside of the chest?" "I don't know as I can tell." "Well I can, it is in the muscles on the outside of your chest." "Are you sure doctor she has no disease of her lungs?" enquired another lady. "Yes, I

am." "Well she has been doctored for disease of the lungs, more than three months, and has suffered enough by it to kill some women." "How so?" "Why besides cupping, her chest was blistered all over for six weeks, and even that did not relieve the pain, and the doctor then told her she must rub that hateful emetic tartar ointment all over the front part of her chest, and she has now had her chest covered with great blotches for six weeks, and the pain keeps up the same as ever." "Ah, I am sorry the doctor has not made himself acquainted with these natural and simple symptoms, when she would have been saved from so much suffering." "Oh, no one can tell how much she has suffered; besides, the nauseating medicine she has taken has I believe destroyed her stomach; for she can't eat any thing, and she is now so weak we are afraid she will starve to death." "The doctor directed a low diet I presume?" "Yes, he would not allow her any thing but vegetables, and but little of them."

We prescribed the magnetic or magnetized gold pills, and the most nourishing diet, to be assisted by the action of the Rotary Magnetic Machine, after ten days.

The disease in the stomach and liver was so intense in this case that we did not dare to risk the action of the instrument on the mus-

cles of the chest, or on these organs until her system was under the influence of the pills.

We did not see this lady until the end of a week, when we found her exhausted system had began to rally its strength, and we then opened our battery, and directed it first to the disease in the stomach with a very moderate power, and then against the disease in the liver.

On removing the handkerchief which she held over the front part of her chest, the latter presented the most horrid and deplorable mangling, the marks of which this young and beautiful lady will carry to her grave. We then magnetized the muscles of the chest, and repeated these operations daily during three weeks, in which time she made rapid progress in the recovery of her health. We then magnetized her two or three times a week, during three or four weeks, and she is now, (July 28th) perfectly well; the disease in the stomach, liver, and muscles of the chest, having entirely disappeared.

Mr. J. R. N. of naturally slender constitution, aged 28 years. We examined this case on the 14th of July 1844, when we found great tenderness on pressing upon the ganglions of the spinal nerves connected with the throat, lungs, stomach, and liver, and pronounced it a case of tubercular disease of these

organs in a moment of time, without the least previous knowledge of the case. "Are you not mistaken about my lungs being diseased," enquired the gentleman. "No I am not." "My chest has just been examined with an instrument you call the stethoscope I believe, and with thumping it, by a doctor whom my physician says *knows every thing about the chest*, and he says my lungs are sound." "He did ha! And how long did it take him to make that discovery?" "About an hour." "And how much did you pay for it?" "Ten dollars." "I have heard of a number of such discoveries by the doctor to whom you allude, that have not only been contradicted by the magnetic symptoms that are present in your case, but by the dissecting knife in a few weeks only after these notable discoveries were made. I have used the stethoscope more than 20 years and know that no dependence can be placed upon it in distinguishing tubercular disease of the lungs, until excavations have formed in the last part of the last stage of the disease, or at a period when such discoveries are of little or no value. And now when your physician sends you upon such an errand again, give him five dollars, or his part of the fee, and keep the other five in your pocket."

"Let me now ask you—have you any cough?" "Yes, I have a cough which com-

menced in February last, but my physician and the doctor that examined me with the instrument, say it all proceeds from my throat, and you don't suppose I could have consumption without a cough?" "Yes I do. I often detect the disease before the cough commences." "Well, can you cure me?" "Yes, you are yet in the first stage of the disease though far advanced in it, and I cure every case in that stage, and many in the last stage."—"How—by your gold pills?" Yes, I can refer you to many in this city and elsewhere that have been cured with them." "Yes, I know some of them I believe, and I will take a box, and is that all I shall want?" "Yes, unless you are in a hurry about getting well, and in that case you should be magnetized a few times after a week or two, or after your system is well under the influence of the pills, as you will get well much faster by doing so." "Well, I have been out of health so long and have taken so much medicine, and have paid out so much money for nothing—I am tired of it, but I will make another trial to regain my health, and will call in about a week and be magnetized."

This gentleman's cough has ceased, and the disease in the throat, stomach, and liver, has entirely disappeared, and he has regained his flesh, and is now apparently as well as any

man, but would soon have been laid in his grave, under the old astrological treatment.

Cases varying little from those of the lady and gentlemen we have described, are not only of daily occurrence, but many occur every day in our practice. Consumption as well as tubercular disease of the other organs, is more uniformly cured by the use of the magnetized gold pills, than acute diseases are by the common remedies. We cure more cases every year than any 10 physicians in this union do of acute diseases, and we have done so many years under the eyes and noses of physicians who on a comparison of the length of our bills, still believe the old astrological practice more conducive to their interests. There are however some physicians who are governed by other considerations in the use of them, and from one of whom we received the history of the following case.

MONTGOMERY, ORANGE Co., N. Y.
17th April, 1844.

Dr. H. H. SHERWOOD,

My Dear Sir,—I was called on the 20th of February, 1842, to visit T. K. of Ulster County, in this state. He was a young man of sanguine temperament, good physical and mental endowments, and up to the time of the present sickness, had enjoyed uninter-

rupted good health. He was 18 years of age, and by avocation a farmer.

His illness commenced Sept 3d, 1841, with swelling in the left knee, and after a few weeks in its fellow also, both joints being very painful. These swellings continued for a few weeks and then subsided, leaving stiffness, langour, &c. Seven weeks after the swelling of the knees had subsided, the shoulder and hips became similarly affected. Chills, fevers, and headaches immediately followed. The family physician being called pronounced the disease *Rheumatism*, and placed the patient under the usual antiphlogistic treatment. Notwithstanding this, however, the disease continued, but was erratic in its character, sometimes attacking the chest, then the head. In July, the throat and tongue became swollen, pus formed under the tongue, afterwards the chin, and then the cervical glands swelled and suppurated. The pain in the left knee and hip, at length gave way to counter irritation, blisters, &c., and from the use of porter, the strength gradually augmented, enabling him to sit up. But thus far the use of the left limb was not recovered, at the same time at this period, great tumefaction and edema took place; in this state bandages were applied, and in September the formation of pus was discovered; on the 15th, the abscess was opened, by

incision in the thigh, about midway, on the outside; on the 23d, another abscess which had formed on the opposite side broke; on the 20th of October he was again able to sit up, and on the 1st of November, could walk with the aid of crutches.

On the 15th of November, while walking he had the misfortune to fall, by which the thigh was fractured 6 inches above the knee. As a matter of course, the limb was placed in splints, the ulcer continuing to discharge.

About the 1st of January 1842, the patient exhibited all those symptoms that indicate the ebbing of the tide of life, and that usually follow suffering from a protracted, and painful disease. He had a dry hacking cough, the hectic fever appeared, the frame was emaciated to a skeleton, and two additional abscesses had formed, and become running ulcers. The usual remedies of blistering, creating counter issues, and prescribing Iodine, Hydriodate Potassa, Extract of Sarsaparilla, Blue Pill, Spanish Rob, Swain's Panacea, &c. &c., constituted the treatment until February, at which time I was called in.

When I first saw the patient he was subject to colliquative sweats, his cough was obstinate, and his pulse seldom varied from 120. The whole left limb displayed the presence of great tumefaction, particularly the iliac re-

gion, The tubercular character of the disease was plainly indicated by these symptoms which were exceedingly unfavorable. He was also subject to great pain, which continued without any visible abatement, or interval of ease. Large doses of morphine were administered to quiet him, and as he and his friends remarked "to smooth the passage to the grave." For 17 weeks he had not left his bed, the pain of moving being too great to be endured. He had availed himself of the services of several experienced surgeons and physicians, some of whom had pronounced him beyond the reach of art.

From the condition of the patient when I was called in I felt the responsibility to be almost terrible; however I entered upon my duty, trusting for success solely on those principles, which for many years past you have been labouring to establish.

Upon a careful examination, I found the diagnosis to be tubercula of the left knee, (white swelling,) implicated with tubercula of left lung, liver, throat, heart, stomach and mesentery, accompanied with a total loss of appetite.

On the patient being placed under my charge, all former prescriptions were thrown aside. The diseased limb was bandaged smoothly from the instep to the knee, and wetted, with

a strong solution of Sal Ferri, Capsra, &c., at the same time fermenting poultices were applied to the thigh every evening. I prescribed a pill morning and evening, and covered the whole thigh with a plaster. I also placed one on the lumbar region, to be taken off at night, however, and the poultice applied.

Under this the magnetic treatment, 12 days from its commencement, the appetite returned, the palpitations ceased, and the pulse assumed a healthy standard. In three weeks the cough and expectoration ceased, the tumefaction subsided, pus of a more healthy character was discharged, and in one week more the patient was able to sit up. In July he could walk with the aid of sticks, and continued to improve steadily. In December last the ulcers, four in number, gradually closed up, and swelling with some pain followed. To alleviate this, one of the ulcers near the knee was re-opened, and serous matter with exfoliation of carious bone was discharged.

Since the re-opening of the ulcer near the knee the patient has improved rapidly. At this time he is able to walk without inconvenience, and labor at his business although not so well as before his illness. Indeed this was not to be expected. The patient when I was called in, was in an almost hopeless state, diseased in his entire system, and emaciated to a

skeleton, therefore the cure must necessarily be very slow, almost as much so as is the growth from infancy to manhood. I have deemed it proper to be thus explicit, in order to show the error in judgment that occurred at the commencement of the disease, as well as the mistakes in treatment that followed. He owes his life to your remedies.”*

A. H., M. D.

Scarlet Fever and Erysipelas.—Scarlet fever is acute tubercular disease of the throat, which is frequently reflected upon the skin, and erysipelas is acute tubercular disease of the skin, which is frequently reflected from the surface to the centre,—to the brain, throat or stomach; and as erysipelas whether acute or chronic is very soon reduced with the action of the Rotary Magnetic Machine, we should here suggest to physicians a thorough trial of the effects of the instrument in scarlet fever. Belladonna is the medicine which should be used at the same time, as well as in erysipelas.

* P. S. These remedies are perfectly safe for persons of all ages and conditions, and are forwarded by express, or mail, to any Post office in the U. S. free of postage,—One hundred and eighty pills in a box, with directions for their use, and will last a patient four or five months, Price eight dollars.—Physicians cannot manufacture them for the use of their patients. H. H. S.

CHRONIC MUCOSIS* OF THE LUNGS.

Chronic Bronchitis.

Mr. J. G. of Sixth Avenue, New York, aged 40 years. Called to see him Nov. 17th, 1844, and found him in the last part of the last stages of chronic mucosis of the lungs. He had severe hemorrhage from the lungs about three months before, about a year after the disease commenced, and was now raising large quantities of matter—was emaciated, had night sweats and sleepless nights—was sinking fast under the ordinary treatment, and in this state abandoned by his family physician as a hopeless case.

There was no pain or tenderness produced by pressure on the ganglions of the spinal nerves connected with the lungs or any other organ.

We now magnetized his lungs in the most thorough manner, and directed Mrs. G. to repeat the operation morning and evening, and give him a pill of the following prescription, morning, noon and night.

Hard Bal. Copa and Cubebs,	- -	3 iiii ss
Ext. Hyos.,	- - - - -	3 ss
Make one hundred pills.		

We also directed the use of Port wine or

* Chronic diseases of the mucous membranes.

strong beer morning and evening, and brandy at dinner, with the most nourishing diet. Mrs. G., after having recovered from her frightful apprehensions of a return of the hemorrhage, from the gormandizing beverage we had prescribed, promised a faithful adherence to our advice, and afterwards called upon us once a week with buoyant spirits to advise us of the favorable progress of the case.

At the end of four weeks a messenger called to inform us that "a gentleman whom we had cured of consumption" had that day "examined Mr. G. and found he had tubercles in his lungs, and required the gold pills."*—I had, however, no hesitation in declaring my belief that the gentleman was mistaken, but promised to call and see the patient, when, on applying pressure upon the ganglions of the spinal nerves connected with the lungs, we found them very sensitive, and consequently that tubercles had formed in his lungs, as they frequently do in the last stage of mucosis. His cough and expectoration had, however, been gradually decreasing—his night sweats had disappeared, and he had gained flesh and strength.

We now added to our prescription in this case the magnetized gold pill morning and

* We did not learn the name of the gentleman.

evening, and in five weeks from this time his cough and expectoration ceased, and he is now, Feb. 20th, attending to his daily routine of business.

We have selected this case for notice from among many others, to show the effect of the treatment in chronic mucosis, and also as an example of the development and treatment of tubercles in the last stage of the disease.

CHRONIC SEROSIS* OF THE UTERUS, STOMACH,
AND LIVER.

Tubercula; Chlorosis; Green Sickness; Pallidus Morbus.

Miss J. S. of Newark, N. J., aged 22 years. On an examination of this young lady in June, 1844, there was found great sensibility to pressure on the ganglions of the spinal nerves connected with the heart, stomach, liver, and uterus, and it was two years since her health began to decline, and a year and a half since the last recurrence of the catamenia. She was greatly emaciated—her skin perfectly blanched—was very feeble, and in the last part of the last stage of the disease. She had been a long time under the ordinary routine of treatment of the schools, but the disease continued to make progress.

* Chronic disease of the serous membranes.

The gold pills were now prescribed, with the action of the Rotary Magnetic machine, and we magnetized the diseased organs from one to three times a week. It was, however, five or six weeks before the disease began to give way, when she began to gain strength, and to show some color in her skin.* Her appetite began to increase, and she now began to gain a little flesh, and more color in the skin. In about four months, her breasts began to expand, and in about six months the catamenia appeared, after an absence of more than two years, and her health was soon re-established. As a matter of curiosity, we have since looked into a number of recent medical works of high reputation, to see the notions of the writers on the subject of the fatal disease called *Chlorosis*, with which our patient was affected; and we have no hesitation in saying that none of them knew a word of the true cause of the phenomena presented in such cases, or of the proper treatment of the disease.

CHRONIC SEROSIS OF THE ABDOMEN.

Ascitis Dropsy.

In the last stage of chronic disease of the

* This young lady required constantly two of the gold pills a day to keep her from sinking.

organs, their serous surfaces excrete an albuminous serum, which accumulates in the cavity of the abdomen, and distends it. Serum is also excreted by the serous surfaces of the fascia of the muscles, when the feet, ankles, and legs begin to swell, and sometimes, with the abdomen, become very large.

We commenced magnetizing a perfectly hopeless case of this kind about seven weeks since, of a lady aged 40 years, and the results have been such as to leave little doubt that the forces from the magnetic machines will be found greatly superior to any other remedy in such cases. It was a case of serous disease, and very great enlargement of the left kidney.

We placed the negative button over the ganglion of the spinal nerve connected with the organ, and moved the other, repeatedly, all over the abdomen, under the full power of the instrument. We then placed the positive button over the ganglions of the spinal nerves connected with the stomach, and repeated, with the negative button, the operation over the abdomen, and then magnetized the feet and legs in the usual manner, under the full power of the instrument.

We repeated this operation nearly every day, with a daily progress of improvement, without any other aid than that of Homœo-

pathic medicines, and the swellings have now nearly disappeared, and the lady's general health and strength greatly improved.

On reading over this case, I find I have described it so as to make it appear not more than about half as bad as it really was, or would have appeared had it been described by her family physician, who prescribed the medicine required during the time we were magnetizing her.

CHRONIC SEROSIS OF THE LUNGS.

Tubercular Consumption.

We magnetized more than one hundred and fifty cases of chronic serosis of the lungs, or tubercular consumption, of both sexes, and in every stage of the disease, in our rooms during the last year, or in 1844; out of this number nine only have died, and of the very few of the above number we are now magnetizing (Feb. 20th, 1845), not more than two will be lost.

Nearly all these cases were complicated with chronic serosis of other organs, as the throat, uterus, stomach, liver, &c., as shown by the magnetic symptoms, and the process of cure in these organs has proceeded *pari passu* with that of the lungs.

These results present a strong contrast with those obtained by the old Astrological symp-

toms, and practice of the schools, in which all are lost.

The proportion of males to females in the above number was nearly equal, and it is a curious fact, that in a great majority of the males, the disease commenced in the throat; while in a great majority of the females it commenced in the uterus, and was from thence propagated, first to the stomach, and then to the lungs. All were constantly under the influence of the magnetized gold pills, and of those that have died, all were in the last part of the last stage of the disease before we commenced magnetizing them, and some of these were not magnetized more than five or six times.

Nothing could be more gratifying to us than to see other physicians curing consumption in the same or a greater proportion to the number treated by them, but before they can hope to do so, they must first learn to distinguish the disease by the magnetic symptoms, or before the sexton is called, or they have made a post-mortem examination.

Nothing can be easier, or more certain, than the manner by which we can distinguish consumption, or tubercular disease of the lungs, or any other organ, and there are now a great many thousand non-professional persons in the Union who distinguish the disease

in any of the organs in the same manner, with great facility and certainty; yet there are comparatively very few physicians that can do so, in consequence of their adherence to the old Astrological symptoms of the schools, in this as well as other diseases, to the motions of the pulse, and the aspects of the tongue, the urine, the stools and the stars.

When they have learned to distinguish the disease in its first stage in the manner we have suggested, then, and not till then, will they be capable of forming any just conceptions of the proper remedies for the disease; as the notions of physicians generally upon this subject are, confessedly, a jumble of inconsistent opinions, of no value to such patients.

“How much have we yet to learn, how little do we really know, of the nature and rational treatment, not only of the diseases of the cerebro-spinal system, but of diseases in general! Assuredly, the uncertain and most unsatisfactory art that we call medical science, is no science at all, but a jumble of inconsistent opinions; of conclusions hastily drawn; of facts badly arranged; of observations made with carelessness; of comparisons instituted which are not analogical; of hypotheses which are foolish: and of theo-

ries which, if not useless, are dangerous.—This is the reason why we have our homœopathists, and our hydropathists; our mesmerists and our celestialists!"—*Dr. Evans of Edinburgh.*"

Dr. Lawson, of Cincinnati, Ohio, was one of the first physicians in the Union, who broke the shackles that bound him to the old astrological symptoms and practice of the schools, and as there are now many hundreds of physicians who have followed his example, it cannot fail to be interesting to them, and useful to others, to see his testimony on the subject of the magnetic symptoms and treatment of a large class of chronic diseases.

From the Cincinnati Whig.

Dr. Sherwood's Magnetic Remedies.

The following correspondence has been handed to us for publication, in the belief that it will interest as well as benefit the community. Doctor Lawson, who testifies to the value and efficacy of Dr. Sherwood's remedies, is a regular graduate of the Ohio Medical College, and a physician of good standing. We have, ourselves, made trial of the remedies, and think we derived essential benefit from them.

For the Daily Worker,

CINCINNATI, January 23, 1839.

DR. LAWSON.—SIR: Having been informed

that you have, during the last year, prescribed in your practice Dr. Sherwood's Electro-Magnetic Remedies in upwards of fifty cases, all of which were CHRONIC DISEASES, including scrofula, with great success, I take the liberty of making the inquiry of you, whether my informant was justified in making such a report from your own admission of the facts.

If you confirm this report, I should consider it a duty we owe to the cause of humanity to give it publicity as much as possible, and if false, we should disabuse the public mind of the imposition.

Dr. S. also challenges investigation as to the electro-galvanic symptoms. Please inform me if you, in your practice, detect diseases by his method of examination.

Respectfully,
B. W.

DEAR SIR: Your communication of the 23d instant was duly received, and an answer should more promptly have been given but for the want of a leisure hour, and a doubt resting on my mind in regard to the propriety of noticing anonymous letters.

Nothing, now, so much influences me to accede to your wish, as a conviction of the importance of the facts which you wish to elicit from me, and thereby to diffuse them more generally through society.

I have a perfect detestation of everything

that has been presented to the world in the form of what has been generally denominated "quack medicines," and on this account I have always felt a delicacy in appending my name, or giving my influence to anything which may justly be "dubbed" with such an appellation.

In the case of Sherwood's remedies, I am somewhat relieved from this difficulty, by two considerations: first, from the stubborn fact that, in my own person, I derived the most decided beneficial effects from their use, and at a time when all other means were pronounced as incompetent to a cure; and, in the second place, from being myself pretty well acquainted with the composition of the "remedies."

These two facts will serve as an apology for me, in candidly expressing my opinion with regard to the medicine. If I did not believe that thousands were suffering from diseases, incurable under any other system of practice, and certainly curable under this, I would not dare to offer one word in favor of Sherwood's remedies. From a conviction of this kind, I hesitate not, for one moment, to recommend them as infinitely superior, in chronic diseases, to any other course at present known to the medical profession.

I did use upwards of fifty boxes during the last year, and generally with success. I am, however, of the opinion, that in advanced stages of pulmonary consumption, they are not

so effectual as one would suppose from reading Dr. Sherwood's pamphlet.

In almost every other form of scrofula, they have surpassed my most sanguine expectations. There are many citizens of Cincinnati who will certify to cures, in certain cases of long standing, which were not benefited by any course which had been pursued (and in these cases you know everything is tried that is heard of), and their certificates will be of sufficient variety, too, to prove all that is claimed for them, even by Dr. S. himself, with the single exception which I have made above.

I do not wish to be understood to convey the idea that they are infallible; that is not my meaning, nor impression, concerning anything on this earth; but I do believe them to be as effectual in curing chronic diseases as ordinary remedies are in curing the ordinary diseases of our climate. I must be understood to have in view, in such a declaration as this, the exception which was made, and again referred to.

With regard to the symptoms, I believe that they cannot be gainsaid. I can detect, with the greatest certainty, the disease called by Dr. Sherwood scrofula, without any previous knowledge of the patient, or of the history of his disease; and this I do merely by an examination of the cervical glands and spinal column.

The ordinary course of feeling the pulse, looking at the tongue, and asking a hundred

questions, more or less, is both useless, and a waste of time. I do not think that one skilled in this mode of examination can be deceived once in a hundred cases. In my practice, I pursue this mode of examination exclusively, with a great saving of time, and a much more satisfactory result. This is as much as I deem it now necessary to communicate.

Yours, &c.,

B. S. LAWSON.

To B. W.

I had no knowledge of the above communication of Dr. Lawson, until two or three months after its publication; and as there are now many physicians, both in this city and in the different States of the Union, who are practising the new symptoms and prescribing the magnetic remedies, I have introduced it here to show the opinion entertained of them by other physicians, who have tested the certainty of the one, and the efficacy of the other.

In the advanced stages of consumption mentioned, we have constantly stated the uncertainty of the results, and urged the necessity of commencing their use in the first stage of the disease, when cases like that of Dr. Lawson are uniformly cured by them; and as the disease can now be easily distinguished, in the first stage as well as the last,

there is now no longer any excuse for delaying their use until the patient is in the last stage, when the result must necessarily be uncertain.

In regard to the Doctor's allusion to secrecy I would remark, that in the course I have pursued to defray the expense of the investigation and cure of this class of diseases, through a long series of years, physicians have no just cause of complaint: for I tell them what the remedies are, explain the principles of their action, and give them the evidence of their efficacy.

There is, however, a cause constantly operating to prevent many physicians from prescribing them in their practice; and that is a self interest, which with them is paramount to every other; for they constantly prefer making up a bill against a patient of from fifty to five hundred dollars, with the old empirical and useless remedies, to a fee of as many cents for a bare prescription; and the tenacity with which they hang on to the *valuable* cases is truly astonishing to the uninitiated, as they uniformly prefer to see them sink into their graves, than saved from them by another physician

This is perfectly natural, and is an example of the almost insurmountable difficulties attendant upon the general introduction of

specific remedies for diseases, that are otherwise incurable. Non-professional persons can now, however, distinguish the diseases to which the magnetic remedies are applicable and specific, with much more certainty than physicians can with the old astrological symptoms; for, if pain more or less severe (in proportion to the intensity of the disease) is produced by pressure on one or more of the ganglions of the spinal nerves, then these remedies are applicable, and specific—no matter what name may have been given to the disease by physicians, nosologists, or other medical writers; and those remedies can be obtained, and successfully applied in those cases, without the aid of a physician.

The following is the case of Dr. Lawson, to which he alludes :—

CHRONIC SEROSIS.

TUBERCULA OF THE RIGHT LUNG.

Consumption.

Doctor B. S. Lawson, of Cincinnati, rather light complexion, tall and slender frame, aged 32 years. Called to see him about the last of October, 1836. His health, he informed me, had been gradually declining about eight years, and about the middle of August last, he began to cough and expectorate very freely. On examining his neck, found the submax-

illary, and some of the cervical glands tuberculated; and on applying pressure on the last cervical vertebra, it produced pain, but it was more severe when applied on the right side, between this vertebra and the first dorsal, while pressure on the other vertebræ of the spine produced no pain or effect whatever.

I now applied the stethoscope to the right side of the chest, and soon found in the middle portion of it, a space of about three inches in diameter, where the respiration was entirely inaudible, indicating from the absence of the crepitus and mucous rattle, a large and solid cluster of tubercles, rendering this part of the lung impermeable and immovable.—The respiration was natural all round this portion of the lung, and every other part of the chest.

Diagnosis. Tubercula of the middle portion of the right lung. He now told me that a celebrated physician,* who was attending him, had also examined him with the stethoscope, and with the same result. He also told me that percussion had been frequently applied, which uniformly gave a dull sound over that part of the lung. He has the usual pale, lean, and haggard look, or consumptive

* Professor Eberle.

aspect of the countenance; the emaciation has made considerable progress; and he is gradually sinking. He has had prescribed for him, and has pursued the usual antiphlogistic treatment, including a large emetic tartar plaster over the front portion of his right lung (from which he suffered severely), with low vegetable and milk diet.

Prescribed magnetic pills and plaster, with no restriction in diet. He commenced gaining strength in a few days after, and in about seven weeks, or at the time he had finished taking one box of the pills, I examined him again with the stethoscope, when the respiration was as audible, in the before-mentioned middle portion of the right lung, as in every other part of the chest, but presented now very clearly in this place the sounds of bronchophony. His cough had now much abated, and he had gained in this time so much flesh, as to make him appear better than he does in his usual health; and had lost entirely the pale, haggard, and consumptive aspect of his countenance.

January 18, 1837. Examined his chest again. The sound of bronchophony in the circumscribed space in the middle portion of the right lung, and his cough and expectoration, have ceased, and percussion gives now a full, clear sound.

He continues to gain flesh and strength, and his face, body and limbs, have now the full and rounded form of a person in full flesh, and the most perfect health.

It will be seen, that after distinguishing consumption by the new symptoms, the chest is, in most cases, explored with the stethoscope. This is done to ascertain the order and state of the tuberculations; for, although they are detected in the first dawning of the disease—even in many cases before the cough commences—yet we cannot tell, without the aid of auscultation, whether these tubercles are scattered about at a distance from each other, or are adjoining each other in small or large clusters, like clusters of grapes, or have softened down and produced a small reparable, or a large irreparable excavation. Hence the doubt that must exist in regard to the curability of the disease in its last stages in this organ, by the natural remedies, without the aid of auscultation, and hence its importance in this, as well as in many other diseases of the chest; yet very few know anything of its advantages, in consequence of a deplorable defect in the education of physicians.

“ It may be useful for me to add to the above history of my case, that besides the most perfect restoration of my health (for such I be-

lieve to be my happy fortune, as far as I can judge), that the above remedies have been a great benefit to me in another point of view. My physician, and other gentlemen of the profession, aware of the great danger hanging over me, advised me to change my location for a more southerly one, as affording the only hope, not of a restoration of my health, but of prolonging my feeble existence; and beyond all doubt it was the best prescription in their power to make. Now, I do candidly believe, that my case was incurable under the common mode of practice, and that the most judicious practice known to the profession was pursued by him to whom I submitted my case. According to the above advice, I determined to remove to the south, and had commenced preparation by selling off a part of my property, when I was, by the kindness of a friend (a physician too), directed to Dr. Sherwood and his remedies—for which I consider myself under eternal obligation to the Merciful Disposer of all good.

“ I do believe that every case of incipient tubercular consumption may be radically cured by a use of the above remedies; and I feel it my duty to submit my case, with these few remarks, to the public, from the fact that thousands are carried to an untimely grave, in spite of the most scientific practice of the schools—that would, in my opinion, have been, with all certainty, saved by the use of the *electro-magnetic remedies*.

B. S. LAWSON, M. D.

CONSUMPTION.—In 77 deaths which occurred in our city last week, 9 were by consumption. In New York 33 perished by consumption in 179 deaths. We believe the proportion in New England cities is still greater.

According to a statistical paper which was recently read at Manchester, one death by consumption occurred in that town, out of every thirty-four families; in Liverpool 2 deaths out of every forty-nine families; in Birmingham, one death out of every thirty-six; and in London two deaths out of every one hundred and five. In the agricultural districts of England, the proportion of consumptive cases to deaths is four in every twenty-one; and in the factory districts, three in every nineteen. The victims by this disease in every year must form quite an army of martyrs—many, we fear, martyrs to fashion; others to poverty, exposure, occupation, or climate.

It seems to us that when we consider the immense mortality, and the few cases of restoration, little attention, comparatively speaking, is paid to this disease, its causes and cure, by the medical profession generally. Doubtless many have abandoned the possibility of cure, except in the early stages. But when victim is added to victim every hour—when all sexes, ages, conditions of life are swept away by the thousand each year—more than ordinary attention should, in our view, be bestowed upon the subject, not only by physi-

cians individually, 'but by our medical colleges and universities.—*Philad. Enquirer*, 1842.

Alas! alas! the brains of the professors of these colleges and universities are so crammed with knowledge, there is no room for more.

SEROSIS OF THE UTERUS.

TUBERCULA OF THE UTERUS, TERMINATING IN CANCER.

Menorrhagia terminating in Cancer.

Miss P. F.—, of —, of full habit and light complexion, aged 22 years; called to see her, May 16, 1812. She has menorrhagia, which commenced four months ago. I prescribed the usual remedies for many months, during which time, as before, she had been constantly confined to her bed: but all to no purpose, and it now became necessary to abandon the patient or commence a new treatment.

She had from the first complained much of pain and weakness in the small of her back; which was attended with leucorrhœa. I proposed now to examine her back, and applied pressure on and around the lumbar vertebræ, and this produced violent pain, which, on every repetition of the pressure, darted into the uterus, and they appeared to be the same darting pains we find in cancer of the breast.

I now prescribed the magnetic pills and plaster. The plaster over the small of the back, or lumbar vertebræ, with injections into the uterus of a strong solution of acetate of iron, by means of a catheter and small pointed syringe.

Her symptoms began to improve slowly from this time, and in about three months, a very thick membrane separated from the inside of the uterus, and was discharged from it, rolled up—round—half an inch in diameter, and two inches in length, which was presented to me in a paper, and on unrolling and spreading it out on a stand, it presented two tumors or bunches, of dark colored fungi near the middle or centre of it,—one of which was near the size and shape of a chestnut, and the other of the size of a pea, and flattened on the sides that adhered to the membrane, and at a distance from each other of half an inch.

These fungi were on the outside of the membrane, or that next the uterus, and adhered to and sunk deeply into it; and there arose out of their tops and sides small white or light colored substances of the size and appearance of small threads, and from a line to a fourth of an inch in length.

On examining the other side of this membrane, small holes or chinks were found opposite to these fungi.

In a few weeks after this, her health was restored. She married about a year after, but has had no children.

NOTE.—It is now (1842) 30 years since I treated the above case, and the remedies by which this lady was cured, have fully maintained their reputation to this time; not only in tubercular disease of the uterus but in cases of the same disease affecting other organs.

SEROSIS OF THE KNEE, STOMACH AND LUNGS.
TUBERCULA OF THE LEFT KNEE, STOMACH,
AND LEFT LUNG.

White Swelling, Dyspepsia and Consumption.

Master Alexander Benedict, of light complexion, aged 15 years, came into my office on crutches, in June, 1837, accompanied by his father. On examining the son, I found he had a white swelling on the left knee, and tuberculated stomach and left lung. The disease commenced in the knee about five years before, and progressed gradually under the treatment of the best physicians and surgeons of this city, until February, 1837, when the disease commenced in the lungs, with cough and expectoration, which still continued, and he was then pale, feeble and emaciated. Prescribed the magnetic remedies. I heard no more from the case until October of the same year, when he called at

my office with his father in perfect health. The white swelling of the knee, with the cough and expectoration, had entirely disappeared, and he had gained so much flesh and strength as to make him appear in as good health as that of any other person, and his health has continued good to this time.

NEW YORK, JUNE 8, 1840.

I have read the above description of the case of my son, and will add to it the fact of my having paid the best physicians and surgeons of this city, about a thousand dollars for their attendance on him, and that they had given up the case, and told me that he could not be cured, but must die; when a gentleman (Mr. Baker) advised me to take him to Dr. Sherwood; I did so, and got him cured at last, as stated above, for ten dollars.*

SAMUEL W. BENEDICT,

No. 2 Merchant's Exchange.

* I have had a great number of similar cases which have terminated in the same manner, and in which from fifty to five hundred dollars had been first paid to other physicians and surgeons for their attendance upon them.

SERO-SIS OF THE EYES.

TUBERCULA OF THE EYES.

Scrofulous sore eyes.

Miss M. Wilkinson, of Syracuse, N. Y., aged 3 years. She had scrofulous sore eyes, with ulcers of the cornea. The disease commenced in 1836, when she was about a year and a half old. It gradually grew worse, and she became blind in about eight months from the time it commenced, and continued so until the spring of 1838, when she commenced the use of the magnetic remedies. In two weeks after she began to see, and in three weeks could see very well, when the shade she had worn a year and a half was removed from her eyes. I saw her in July of the same year, when her eyes were entirely well, and she enjoying fine health.

Her father is wealthy, well educated, and intelligent, and obtained the attendance and advice of the best physicians in the case; but the disease continued to make progress until it was arrested by these remedies.

In a great majority of the cases of curvature of the spine, we use a magnetic scrophulous plaster over the white-swellings, by which they are reduced much faster than they are by the use of the machine alone. The plaster is removed and renewed once or twice a week, when these swellings are magnetized.

The effect of this plaster with the magnetized gold pills, without the use of the magnetic machine, will be seen in the description of the following case, which we treated and published before we introduced the use of the above instrument.

Miss E. B., of Stratford, Conn., aged twelve years. I called to see her in Dec., 1839, and on an examination found a lateral curvature of the dorsal vertebræ, a portion of which extended under, and raised the right shoulder blade. The right hip was also raised above the left, and her health and strength much reduced.

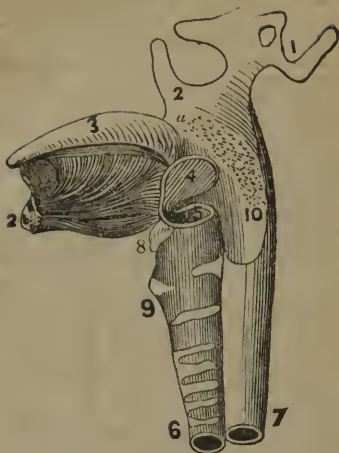
Prescribed the magnetic remedies. The plaster to extend the whole length of the spine. The weight of her body was also directed to be suspended by her arms, with any simple contrivance, as by taking hold of a stick suspended from a ceiling, a few minutes, five or six times a day.

I called to see her again the last part of April, 1840, when, on examination of the spine, it was found to have resumed its natural position, and her health and strength perfectly restored.

I frequently find such patients harnessed with cushions and splints, but regarding them as worse than useless, I always remove them.

The true cause of lateral curvature of the spine is not understood. They are *always* cases of tubercular disease of the muscles of the spine. The tuberculations, or white-swellings, are always on the posterior side of the curve, and produce the deviations of the spine.

PLATE M.



Lateral or Side View of the Throat.

1. Part of the ear and right temporal bone. 2, 2. Jaw bone of right side. 3. Tongue. 4. Epiglottis. 5. Glottis, or upper part of the larynx. 6. Trachæ, or wind-pipe. 7. Œsophagus, or gullet. 8. Thyroid cartilage. 9. Cricoid cartilage. 10. The upper part of the Œsophagus and pharynx laid open. *a*. Tubercles in the pharynx, or upper part of the Œsophagus.

Tubercula of the Throat.—In tubercular disease of the throat, it is always contracted and smaller than natural, in consequence of the tuberculations, and consequent thickening of its walls. In recent and also in slight cases of this disease, there is a thickening and elongation of the uvula or palate, and of the tonsilar curtain on each side of it; but in the older or more severe cases, tubercula may be seen in the back part of the throat, *a.* and the uvula large and elongated. From a mere hawking to raise matter from the throat, a cough generally succeeds from an extension of the disease to the lungs; and we should here observe that in about nine cases out of ten of tubercular consumption in males, the disease commences in the throat first, and is from there propagated to the lungs; but in females this order is reversed, and the tubercular disease propagated from the uterus to the lungs. The excretions from the tuberculations are from the throat in males, but are from the uterus in females, and called leucorrhœa.

In a few of the older and more severe cases of tubercula of the throat, the disease is propagated to the epiglottis, Plate M., Fig. 4, which becomes more or less thickened, and its motion over the glottis or upper part of the larynx, Fig. 5, more or less impeded in breathing, talking or swallowing, and there is now more or less hoarseness. In some of these last cases, the disease extends to the larynx, when the hoarseness is greatly increased, or the voice entirely lost, from the immobility of the epiglottis, the thickening of the muscles and membranes in the upper part of the larynx, Fig. 5, and of those of its ventricle a little below the lower part of Figure 5. Many of these cases terminate in ulceration of the larynx in the last stage of the disease, as seen by clairvoyants, and in post mortem examinations.

The magnetic remedies, or the magnetized gold pills and plaster, cure every case of this disease in its first stage, and very nearly all in its last stage. It, however, should never be forgotten that these patients generally recover much faster with the daily use of the magnetic machine at the same time. Cases of aphonia, or loss of the voice, from an extension of

the disease to the larynx, as described above, uniformly recover their voice by the action of these remedies. The progress of the cure is sometimes

much increased by the use of gargles of a *strong* solution of the nitrate of silver, and by spreading this solution over the larynx, or epiglottis and glottis, with a probang N. armed with a small piece of fine sponge wet in the solution.

We have used from thirty to sixty grains of the nitrate of silver to an ounce of water in these cases. The probang is made of whalebone, and is about 12 inches long, including the handle. It is bent, as seen in the figure, and the sponge full of the solution, thrust down the throat to the top of the larynx. The throat is first gargled a few times with this solution to lessen the irritation of the throat before an attempt is made to introduce the probang, when we will generally succeed the first time in reaching the larynx. The operator should then press hard upon it, so as to make the solution pass from the sponge through the glottis and chordæ vocalis, into the ventricle of the larynx, and if the case is a very bad one, the sponge itself should be thrust into the ventricle.

N There is not the slightest danger in introducing the solution into the larynx in this manner in tubercular disease of the throat, which may be repeated once or twice a week for a few weeks, as may be required.

Acute serosis, or inflammation of the larynx (croup), has been treated thus with great success.

The passage of this solution from the sponge into the ventricle of the diseased larynx, does not in general produce as much irritation as is often produced by the passage of a drop of water into it in a healthy state



MAGNETIC MISCELLANY.

In magnetizing a boy aged 12 years on the 23d of March inst., with recent paralysis of the *left* arm, tongue and face, and tetanic rigidity of the muscles of the neck, &c., we placed the positive button in his *left* hand, and the negative button in our *left* hand, while we made passes with the right hand over the face during four or five minutes. In about five minutes from the time we finished the operation, our *left* arm began to *ache*,* and the intensity of this sensation increased so rapidly, as to completely paralyze the arm in one minute, and in about two minutes it was so great as to be insupportable. A sinking sensation began to pervade the system, when we called for assistance, and had the negative button quickly placed in the left hand, and the positive on the neck, under the full power of our largest machine. We soon felt a pleasant sensation from the action of the instrument: the horrible aching sensation began to give way, and in about five minutes it had ceased very nearly, and the motion of the arm was restored. In this case the disease in the left arm of the boy was conducted to our left arm by the current from the positive button in an opposite direction from the current which was at the same time moving from the negative to the positive button.

This manner of magnetizing is a very plea-

* ACHING is the sensation produced by the prevalence of the positive over the negative force, and PAIN the sensation produced by the prevalence of the negative over the positive force.

sant one for patients, but sometimes, as we have now learnt, a very dangerous one for magnetizers.*

The most severe cholic pains are reduced with great rapidity by the action of the machines, as we are informed by several physicians. Two cases of recent dropsy—one from chronic serosis or tubercular disease of the heart and muscles, and the other from chronic serosis of the liver and right kidney, have, we are also informed, been promptly removed by the action of these instruments.

Asthmas which have long defied every other remedy, have readily yielded to the action of these machines. In these cases, patients should be magnetized as in Bronchitis.

The importance of a scientific application of the buttons may be seen in the fact, that many cases of disease which resisted an empirical manner of magnetizing, have yielded readily to a scientific application of the buttons.

Dr. Cox, of Williamsburg, N. Y., has cured a bad case of white swelling of the knee, with the Savage Rotary Machine alone.

Dr. Baker, of Brooklyn, New York, has brought a child about two years old to life, and saved it with one of these machines, after it had been apparently dead 10 or 15 minutes.

Dr. — brought a child to life under similar circumstances. It breathed a few minutes, but in consequence of some difficulty in running the

* We have taken disease in mesmerizing patients, and in each case it was the exact counterpart of the disease with which the patients were affected.

machine, the child was lost. On learning these circumstances, we determined, if possible, to have a machine which should not be subject to such accidents, and we have succeeded in the Vibrating Machine, with the assistance of the ingenious Mr. Cornell, of the Magnetic Telegraph.*

SALT RHEUM. The worst cases of this disease are quickly cured by the action of the machine. Dilute sulphuric acid is the remedy to use at the same time. One drop of the acid to ninety of alcohol—magnetize. Dose three to five drops two or three times a-day, in a wine-glass of water.

Dr. Milspaugh, of Orange county, N. Y., has cured a case of Amaurosis with the Savage Rotary Machine.

There are some cases of rheumatism in which pain in a limb or other part of the system commences or is increased on becoming warm in bed at night. In these cases the Tincture Rhus Toxicodendron† is the remedy which should be used in conjunction with the action of the machine. Dose, 1 to 3 drops in a wine-glass of water, three times a-day, according to the age and condition of the patient.

BILIOUS FEVERS.—A number of physicians of this city and country, have reduced violent paroxysms of fever with these instruments, in

* Impostors are already engaged in attempts to impose on the public miserable imitations of these machines.

† Weismann & Cassebeer, German Apothecaries, New York.

from five to ten minutes. The excessive action of the instrument on persons in health, produces fever.

The blood is dark-colored in fevers and in acute and chronic diseases, and becomes more florid under the action of the instrument.

In the Vibrating Magnetic Machines, the circuit of the forces is broken so fast as to make their motions continuous, without variation of intensity except by the action of the piston, and they consequently accumulate in the system with great rapidity.

In from five to ten minutes from the time we commence magnetizing patients, the pores of the skin are generally opened by the action of these forces, and they begin to perspire. It is commonly only necessary for patients to hold the buttons in the hands, under a moderate power of the instrument, to obtain these results.

Nothing can be compared to the curative action of these machines in acute diseases, or in inflammations. The Lancet, Calomel, and Blue Pill, which entail diseases on millions of the human race every year, may now be laid aside with perfect safety to patients, and abiding benefit to their posterity.

Some physicians think these instruments are of greater importance in acute diseases than in those that are chronic, from the great rapidity of the cures in such cases. They should, however, never forget the fact, that chronic diseases are slow in their progress, and consequently necessarily so in the cure

Magnetizing in Lateral Curvatures of the Spine.

Drawn and Engraved from a Daguerreotype.



IN magnetizing for lateral curvatures of the spine, we have introduced the chair represented in the engraving. It is a strong common office arm-chair, the upper and back part of which being sawed off, and the front part cushioned—the right arm resting on one cushion, and the magnetizing buttons on the other. A loose cushion is crowded into the space on the right side, and a strong gallon glass-bottle placed upon it; when the young lady with a right and left spinal curvature—or having the upper part of the spine curved to the right, and the lower part to the left side—is drawn over the bottle by an assistant, in the manner seen in the figure, and the buttons applied in the usual manner, as described in p. 60-61.

In this case, it was eight years since the curvature commenced; and there was, as usual, a large white swelling of the right scapula, or shoulder-blade, which drew the spine under it.

On the 23d time we magnetized this patient (May 17, 1845), the white swelling being greatly reduced, and the atrophied or emaciated muscles on the opposite side much thickened, the spine passed the centre, under the action of the machine, and began to curve to the left side, as seen in the figure.

The most prominent part of the white swelling was of a dark red color, produced by the heavy brass corsets the young lady had long worn, which was consequently shown in the daguerreotype.

We have here presented in the plainest manner, the extraordinary phenomena of the reduction of hypertrophied muscles on one side of the spine, and the thickened atrophied muscles on the other, by the action of the machine *alone*, directed by a scientific and easy application of the buttons.

TUBERCULA OF THE MUSCLES.

**Effects of Magnetising upon the Magnetiser—
Rheumatism—Dizziness—Cold feet and hands
—Neuralgia—Tic-Douloureux—Hahnemann
and Homœopathic remedies.**

WE probably receive, on an average, fifty shocks a day in magnetising our patients, either from accidentally touching the unprotected parts of both buttons, or from touching the patient with one finger and a button with the other, and were at first much alarmed at the consequences that might result from it. We have been, however, not only happily disappointed in our expectations of injury, but have found it a great benefit to us. It has removed every vestige of chronic rheumatism with which we have been much affected during the last fourteen years.

We never had so much elasticity in our body and limbs, and never had so much strength; we never walked with so much ease as we now do; and besides, we frequently, even after having gone through a great labor during the day, feel so much elasticity and buoyancy that it is rather difficult to sit or stand still, from a strong inclination to be moving, jumping, or dancing; these sensations are in fact sometimes so strong as to require great efforts to repress them.

Persons affected with rheumatism, and especially those in the decline of life, are more or less subject to turns of dizziness, which sometimes compel them to sit or lie down suddenly, to prevent them from falling; and we had been much affected in this way. But these premonitory symptoms of palsy have entirely disappeared with those of rheumatism; and we have removed these symptoms in many other cases, by magnetising the brain—a practice much more simple and effectual than the old routine practice of the schools. Those who are affected with rheumatism are very subject to colds, and to cold feet and hands.

A great number of the cases of head-ache, are those of rheumatism affecting the muscles of the head, and the membranes of the brain; and the muscles of the face are affected with rheumatism under the names of Neuralgia and Tic-Douloureux; and those of the heart under the name of hypertrophy of the heart.* Many of the cases of vacillating pains about the chest—of the front, right, and left side, along the pectoral and intercostal muscles, are cases of rheumatism, often mistaken for disease of the lungs. These cases are all

* In magnetising for headache, the negative button should be placed over the point where the pain is most intense, as in other cases.

distinguished in an instant by the *pain* produced by pressing with the thumb and finger on the intervertebral spaces of the middle and back part of the neck, the intensity of which increases with the intensity of the disease; and physicians, on commencing the practice of the magnetic symptoms, are often surprised to find the great number of cases of rheumatism—of tubercular disease of the muscles, as well as of the organs.

Hahnemann committed a great error in mistaking tubercula of the organs and muscles for Psora or Itch, as every physician knows who practises these symptoms; and in searching for remedies for this imaginary affection, or "*anti-psorics*," justly subjected himself and his followers, or homœopathists, to the imputation of chasing a phantom.

These remedies, like those of the Allopathists, have no effect in chronic diseases of the organs and limbs, but that of palliating urgent symptoms in the periods of excitement, which uniformly follow those of repose. They *never* cure the disease, and have little or no effect upon those who are not very susceptible to mesmeric or magnetic influence.*

* The great number of cases we have examined with the magnetic symptoms during the last seven years, after they had been a long time under the treatment of the homœopathists of this city, has left no doubt upon this subject.

Homœopathic remedies are, however, generally very efficient in acute diseases, and are useful as palliatives in those that are chronic.

The negative and positive surfaces of the fascia of the muscles are both equally affected in acute rheumatism, and the affected limb or limbs are consequently paralysed; and in chronic rheumatism, the positive surface of the fascia in which the motor nerves terminate, is more or less affected, and the motion of the limb or limbs more or less impeded, and hence the necessity of using positive as well as negative medicines, or combinations of positive and negative medicines, in many cases of this disease. The uncertainty in regard to the extension of the disease in the different surfaces, relatively to each other, necessarily makes the true remedy for any given case uncertain, excepting only the magnetized gold pills and plaster.

Rheumatism.—R. Rotary Magnetic Machine, Animal Magnetism, Magnetized rings.

Rheumatism.—R. Nitrate Potash, $\frac{3}{4}$ j.; water, 8 oz. Mix. Dose, a teaspoonful 3 times a day, in a wine-glass of water.

Rheumatism.—R. Tinct. or Vin. Colchicum, $\frac{3}{4}$ i. Dose, 5 to 30 drops, accord-

ing to the age of the patient and the severity of the pain. Repeat the dose, if necessary, 2 or 3 times a day during one week only.

Rheumatism.—R. Iodide Potash, 3 ij., water, 8 oz. Mix. Dose, a teaspoonful 3 times a day in a wine-glass of water.

Rheumatism —R. Tinct. Rhus. Tox., 3 ii. Dose, 1 to 3 drops, morning and evening, in a wine-glass of water.

Morphine or Belladonna may be given during the use of either of the articles in the above Recipes, if necessary to allay the severity of the symptoms.

ATROPHIA RHEUMATICA.

Atrophia of the muscles—Chronic mucosis of the muscles—(Chronic disease of the negative or mucous surfaces of the fascia of the muscles.)

In atrophia rheumatica, or chronic mucosis of the muscles, they are always *flattened*, emaciated, and feeble. The disease, with the emaciation, pursues its course in the most quiet manner, without pain or other disturbance in the muscles, excepting only *aching* sensations from over-doing, or changes of temperature. Like chronic cerosis, hypertrophy, or tubercula of the muscles, it is often produced by frequent changes of temperature, and is often complicated with this disease, and is sometimes the sequel of it.—Give mucous pill, p. . 63

One of these pills should be taken after breakfast and another after tea every day, excepting in cases where it is complicated with tubercular disease, when one after breakfast, and a magnetised gold pill after tea should be taken in place of the above.

When we find that in the case of tubercula of the muscles, the tuberculations have disappeared, as evidenced by a flattening and emaciation of the muscles, the magnetised gold pills, or other remedies for tubercula, should be discontinued, and the above pills for atrophia substituted in their place.

The same course should be pursued in cases of tubercula of the heart, or uterus, as they are muscular organs. Clairvoyants, who distinguish these different states of the muscles, and of the organs, can tell when we should use one of these different remedies, or both of them at the same time. If the process of cure should be very slow in cases of atrophia, Phosphorus may be given once a day (5 globules) during 5 or 6 days, when they should be discontinued a few days, and then repeated, if the urgency of the symptoms require it.

The above medicines, with the daily use of the Magnetic Machine, will be all the remedies that will be required in these cases of atrophia, excepting only those that are in the last part of the last stage of the disease, when medicines of any kind will be useless.

These cases of atrophia are comparatively very rare, about one to 49 of tubercula.

CONSUMPTION.

We would again direct the attention of the readers of this work to the importance of the use of the magnetic machine in the treatment of tubercular consumption, as our experience of its effects in more than 450 cases of this disease leaves no doubt but it greatly assists the action of other remedies in reducing tubercular disease of the lungs.

These cases were all distinguished by the magnetic symptoms, which *never* err; and the state of the tuberculations was often observed through clairvoyance during the progress of the treatment, as were the changes in the appearance of the tubercles from the action of the instrument.

Of 164 cases of ladies and gentlemen who visited our rooms in 1844, in all the different stages of the disease, we lost only *eleven*; and of 203 who visited our rooms in 1845, we have lost only *nine*. In two of these the tuberculations were reduced as shown by the magnetic symptoms and by clairvoyance, but both died of mucous disease, in the then feeble state of the lungs, in consequence of colds.

All the cases were, from the commencement of the treatment, under the action of the magnetized gold pills in conjunction with that of the machine, and in a great majority of the cases the magnetized plaster was used at the same time. No other medicines were used in these cases, except, occasionally, different articles to palliate the cough, and in a few cases the Hardwood Tar Syrup, or the pill composed of Hard. Bal. Copa. cubebs and Ext. Hyos., where the tuberculations were accompanied with much mucous disease, generally from colds after the tubercles had nearly disappeared.

This course of treatment, in fact, cures every case of consumption in the first stage (which is easily distinguished), and more than nine-tenths of the cases in the last stage.

We should have lost but eight cases in 1845, but for the interference of a physician, who persuaded the mother of a young lady, nearly recovered from the disease, to allow him to prescribe for her, when she soon began to grow worse, and then he began to apply his cupping glasses to the chest, from which she bled freely, and soon carried her to her grave.

MAGNEPATHY.



THE DUALITY OF DISEASES, AND THEIR DUODYNAMIC TREATMENT.

The division of diseases into two classes, is founded in nature, as may be seen from the fact, that one class originates in, and is connected with, the serous membranes, tissues, and surfaces; while the other class originates in, and is connected with, the mucous membranes, tissues, and surfaces. The termination of the nerves of sensation in the serous, and of those of motion in the mucous membranes, imparts to these membranes opposite, or negative and positive characters; and they, consequently, impart opposite characters to their diseases. The magnetic or scientific symptoms by which the diseases of these different membranes are distinguished, are opposite, or positive and negative symptoms; and the natural or most successful remedies for these different diseases, are also opposite in character, or positive and negative remedies—the specific remedy for diseases of one class having no curative effects in diseases of the other.

These dual divisions of the membranes, nerves, diseases, symptoms, and remedies, correspond with the known duality of the human frame, and have the indelible marks of truth and nature stamped upon them.

The Selection of Medicines.

A very great difference has long been observed in the susceptibility of different persons to the influence of medicines; and the same difference is now constantly observed in the susceptibility of different persons to the influence of mesmerism. and the magnetic machine: those who are very susceptible to one, being equally so to the other.

The magical effects of these influences upon some persons, gave rise to the practice of mesmerising medicines in Germany, and of magnetising them in this country, and at about the same period (1810.)

The powers of medicines are greatly exalted by these processes; and hence the cause of the use of small infinitesimal doses of medicines, as practised by the homœopathists.

The effects of these medicines upon children under ten years, and upon adults who are susceptible to mesmeric or magnetic influence, are very prompt and salutary; but they have little or no effect upon the naturally insusceptible, or upon those who have become so from disease. And as large doses of medicine are as dangerous to those who are very susceptible to these influences, as very small doses are useless to the insusceptible, it is a matter of great importance, in many cases, to ascertain the degree of susceptibility of patients; and this can be ascertained in a moment by a mesmeriser, or by the action of the magnetic machine.

The Repetition of Doses.

In *acute* diseases, the doses should generally be repeated in from one to four hours, according to the greater or less urgency of the symptoms, and the effects produced by the medicines, with low diet.

In *chronic* diseases, the doses should be repeated from one to three times a-day only, according to the urgency of the symptoms, with full diet.

The Action of Medicine.

Chemical affinity, by which matter is decomposed and recomposed, depends upon the magnetism in innate matter, and magnetism is also innate in medicine as in every other kind of innate matter, and is *modified* more or less by the medicine or matter with which it is combined, and this modified magnetism in medicines acts upon the magnetic or spiritual forms of our bodies through the nervous system, as the magnetism of one magnet acts upon that of another.*

It is not, therefore, the mere matter of medicine abstracted from its essence or spirit, that acts upon our spirits, but it is the magnetic essence or spiritual parts of medicines that thus acts.

The magnetism in inanimate matter is unorgan-

* Originally in the formation of our globe, its nebulous or etherial magnetized matter was condensed by the action of the magnetic forces, and formed an immense hollow sphere or globe of water. The process of condensation continued, and these opposite forces formed first muriatic acid, and then soda, and these being mixed by the action of the waters, formed a strong solution of muriate of soda, and hence the muriate of soda was universally diffused over the globe as we see it at the present period, in the ocean and on the islands and continents from which the ocean has receded. Condensations continued, and from the combination of these new elements with the water, granite an insoluble compound was formed, and sank to form the inner crust, and foundation of the future earth,—of islands and continents, and for an infinite number of combinations of different kinds and forms of matter, in the mineral, vegetable and animal kingdoms.

ized, and has comparatively very little power, but when we magnetize this matter and thus give form to its magnetism, its power is increased a thousand fold, as is seen in magnetizing a piece of iron or steel; for before it is magnetised it will affect the compass or variation needle very little or only in the slightest manner, but when we have magnetised, added to, and given form to its magnetism, its power is increased a *thousand fold*, and hence the origin of our idea or notion of *magnetising medicines*, which we commenced in 1810 and have continued to this time.

It may be objected that magnetism is a physical and not a dynamical power. It would, however, be a great mistake to suppose so, for magnetism is both a physical and dynamical power, and is the origin and foundation of duodynamics, or of the two powers or forces, male and female, which not only produce motion everywhere and in everything, but are endowed with the divine power of creating and forming everything in nature—the solar systems, and their mineral, vegetable, and animal kingdoms. Magnetism is unorganised or without form in inanimate matter, but is organised in regular forms in *animate* matter, hence organised magnetism is necessary to the existence of vegetable and animal life—of living beings, and hence living beings are organised with regular magnetic or spiritual forms, or are magnetised bodies; for to magnetise a body is to make a magnetic or spiritual form in that body; so when we have magnetised a person we have made a spiritual form in that person, in addition to their natural spiritual form.

The magnetic power is identical with the nervous

power, as shown by the magnetic symptoms, and by the experiments of Dr. Philip, Dr. Ure, M. Donnie, Professor Matteucci's, in the appendix to this work. Magnetism is accumulated through the nerves in the opposite hemispheres of the brain, from the opposite or serous or mucous membranes or surfaces, including the outer skin or surface, and the inner skin or surface that lines the inside of the lungs and alimentary canal. The positive force is accumulated in the left hemisphere from the outer and the negative force in the right hemisphere from the inner surface, and there form positive and negative poles, in the same manner they are formed by the accumulation of the opposite forces from the opposite surfaces to the opposite poles of the common Galvanic battery. The outer or serous surfaces of the human system excrete negative matter which gives out the positive force, while the inner or mucous surfaces excrete positive matter which gives out the negative force, to be attracted through the nerves to the different hemispheres, and corresponds with the different surfaces of different kinds of matter from which the different or negative and positive forces issue by the action of an acid upon the said surfaces of the Galvanic battery. The first, however, is a natural and sustaining battery, while the last is artificial and transitory.

The discovery of the magnetic symptoms suggested the theory of the magnetism of the human system and of the identity of the magnetic and nervous power, and by the practice of those symptoms we discovered and demonstrated the exclusive connection of the nerves of sensation with the skin and

serous membranes, and of the motor nerves with the mucous membranes. The exclusive connection of the nerves of sensation with the skin and serous membranes, was demonstrated by the presence of the magnetic symptoms in diseases of the skin and serous membranes, acute or chronic, and their entire absence in diseases of the mucous membranes. This evidence was direct, irresistible and conclusive; but it was directly opposed to the theories and practice of the schools, which taught a great sensibility in the mucous membranes, and they and their dupes continue to practice upon these theories to this time, and we consequently sought for other and corresponding evidence on this subject; and first we inquired of clairvoyants in regard to these exclusive connections of the different kinds of nerves with the different kinds of membranes, when they traced them from the different *fibres* of the brain through the different spinal nerves to these different membranes, and from these different membranes to the different fibres and organs of the brain.*

We then obtained a brass cylinder five inches long, and half an inch in diameter, with a brass nob three-fourths of an inch in diameter, soldered on one end of the cylinder, and a loop of brass wire on the other, and connected this loop with one of the wires of one of our most powerful magnetic machines, and directed a female affected with leucorrhœa, to introduce the whole length of this instru-

* The concurrent testimony of clairvoyants is as good evidence as any other.

ment into the vagina, and then apply the button attached to the opposite wire over the lumbar vertebræ, when after having remained in this situation about ten minutes under the full power of the machine, she removed the instrument and came out of her retreat to inform me that she felt the button over the vertebræ very powerfully, but contrary to her expectation she did not feel the slightest effect from the instrument she introduced into the vagina. We induced her to repeat this experiment more than a dozen times in the course of a few weeks, which were always attended with the same result, and we also induced more than sixty females affected with tubercula of the uterus to magnetise this organ in the manner above described, in the course of as many days, and with the same result as in the first case.

The result of these experiments with the magnetic machine, like those of the magnetic symptoms, are therefore perfectly fatal to the theories and practice of the schools, and are conclusive and final.

The discovery of the exclusive connection of the different kinds of nerves with the different kinds of membranes, suggested the theory of the necessity of different or opposite characters in the diseases of the different membranes, requiring a different or opposite treatment, and subsequent observations have confirmed this theory in the most conclusive manner, upon which a simple, safe and uniformly successful practice is founded.

The discoveries of the magnetic symptoms, the magnetic organization of the system, the identity of the magnetic and nervous power, the exclusive

connection of the different kinds of nerves with the different kinds of membranous surfaces, and of the different diseases of the different kinds of membranes, requiring different kinds of treatment, and the introduction of the magnetic machine to cure diseases, cannot fail to produce an entire revolution in the theory and practice of medicine, in this country—on this continent—in Europe—in Asia, and over every part of the civilised world.

Changes in the Magnetic States of the Atmosphere.

Acute and chronic diseases are often produced, and also often aggravated by changes of temperature, by colds, over-doing, and by other causes, and the *symptoms* of aggravation, and also of alleviation, are uniformly and constantly changed with the changes of the *wind*, the consequence of the changes in the *magnetic* states of the atmosphere; and hence persons who are very susceptible to *magnetic* influence, are also very susceptible to these changes.

The magnetic machine, magnetized medicines, mesmerism, and homœopathic medicines, will generally be found much the best and also much the safest remedies, or palliatives in these cases, and are generally indicated by the symptoms, as the magnetic machine, in acute pain, spasms, aconite in colds, sore throat, hæmorrhage, &c.; colocynth in aching pain, spasms, &c.; colic, and arnica in shocks, bruises, sprains. Page 180, &c.

ON THE USE OF MEDICINE.

THE introduction of the Magnetic Machine forms a new era in the practice of medicine. The lancet, calomel, and blue pill—the universal panaceas of the profession, which entail diseases on millions of the human race every year—may now be laid aside, with perfect safety to patients, and abiding benefit to their posterity. The action of the magnetic machine, colchicum, aconite, and mercurius solubilis, answer all the purposes for which the lancet, calomel, and blue pill have been used, and in the most prompt and satisfactory manner. These are the reasons why we have not recommended the use of these remedies in the foregoing pages.

Colchicum removes acute pain in the most violent inflammations in a more prompt and satisfactory manner than the lancet; and many distinguished physicians have, consequently, long believed that the profession might safely dispense with its use. The influence of the magnetic machine has since been brought to the aid of the colchicum; and there is now no doubt of the great superiority of their combined influence over the lancet, in reducing inflammations—one or two doses of the tincture of sem. colchicum being generally sufficient in these cases.

The use of this remedy, like every other in acute disease, should be discontinued when its specific effect, or the effect for which it was given, has been obtained, and another remedy substituted in its place, if the symptoms in the course of the disease make it neces-

sary to do so. So if we find we have not selected the right remedy, it should be discontinued, and another substituted in its place; and we have, consequently, arranged the remedies for the different diseases of the organs, as seen in pages 239, 241, 243, and 245, commencing generally with the most potent or important remedy first, and the next, second, &c.

The action of the magnetic machine should be combined with the use of either or of all the different articles of medicine, as the case may require.

Persons who attempt to treat diseases, or administer medicines, must also be supposed to know the importance of diluting the doses with water—of warming their patients in the cold stage of fever, and of cooling them in the hot stage—of the application of steam, if necessary, in the first, and of ablutions of cold water in the last—of the internal use of cold or ice water—and of the necessity of keeping the bowels regular.

In the treatment of fevers, it should never be forgotten that intermittent fever, or ague, is the likeness or type of other fevers; that remittent, or bilious fevers, differ very little from intermittents; and that, consequently, the treatment of the former should vary but little from that of the latter. As nearly all of those, however, who are said to die of bilious fever, actually die of chronic diarrhœa, or chronic dysentery, from ulceration of the intestines, *no time should be lost* in commencing the use of the remedies for *chronic serosis*, if such patients do not begin to gain strength *immediately* after the inflammatory symptoms have subsided; as the adoption of this course will save *nearly every case* which would otherwise be lost.

In treating bilious, congestive, and yellow fever, we should first take a pin or needle, and scratch through the epidermis, or scarf-skin, in lines from about one-eighth or a quarter of an inch apart, and from three to six inches in length, according to the intensity of the disease, as seen in the figure page.

Emetic tartar ointment should then be rubbed over these lines, when an acute eruptive process commences instantly, and the irritation continues very steadily seven or eight days, which includes the periods of *tuberculation* and *ulceration* in these fevers. We have pursued this course constantly, and with uniform success, in a very great number and variety of cases of bilious and congestive fevers. Even cases we have found abandoned by their physicians, in a tympanic and comatose state, have been saved by the use of this ointment on lines thus made, and extending nearly the whole length and breadth of the abdomen.

This practice is strictly Homœopathic and effective, and should always be resorted to in cases of any importance, in the absence of the magnetic machine. For after-treatment, see Index of Diseases.

This remedy is very effective, and may also be resorted to in any other acute disease of the stomach, abdomen, chest, or trachea, where the most prompt, acute, and steady inflammation of the skin is required as a counter-irritant.

RECAPITULATION

In arranging the remedies for acute serosis of the organs and limbs (page 173), the magnetic machine has been placed in the first rank, because it reduces acute pain in disease of the serous membranes in a more prompt manner than any other; and colchicum and aconite are placed next in order, not only because these medicines stand next in importance, but because they should generally be used at the same time with the instrument.

The machine has also been placed in the first rank in the treatment of acute mucosis, and other remedies in the order of their importance, which should be used at the same time, or follow the action of the instrument.

In arranging the remedies for chronic serosis, the magnetic remedies, or magnetized gold pill—compound chloride of gold—have been placed in the first rank, because they are the specific and homœopathic remedy for the disease, with or without the machine, no matter what part of the system is affected by it. They, moreover, neutralize or destroy tubercular or scrofulous taint, hereditary or acquired.

Besides the ordinary cases of confirmed chronic tubercula, this remedy should be used in the last stage of many acute diseases—as in cases of bilious and infantile fever, cholera infantum, &c.—when the acute symptoms have subsided, and the disease has become chronic. If, however, this specific remedy is not at hand, or cannot be obtained, the common remedies for

chronic tubercula should be prescribed, as iodine, the iodide of potash, muriate of gold, of tin, mercury, silica, &c. Little or no dependence, however, can be placed upon these common remedies, or in the common manner of distinguishing the diseases in which they are used, as will be seen from the following extract from M. Lugol's lectures on tuberculous diseases, or scrofula—Paris, 1841.

“Tubercles may exist in parenchymatous organs, may even partly annihilate them, without their existence being revealed by any external symptoms.* Our want of success in the use of the ordinary means of diagnosing tubercles, proves that those means are inadequate, that we follow an erroneous course in our investigations, and that we must resort to new modes if we wish to be successful. The numerous checks and repeated deceptions to which physicians are daily exposed in the diagnosis and treatment of tuberculous diseases, do they not prove that it is necessary to leave the beaten track of inquiry, and pursue some other which is less fallible?”

Besides, every physician of learning and experience knows that no dependence can be placed on the old astrophysical symptoms, by which they have been taught to distinguish tubercular disease, or on the common imbecile remedies for it.

* H. Lebert, M. D., as well as M. Lugol, has recently shown, by microscopical observations in post mortem examinations, that tubercular disease pervades the organs and limbs, and every other part of the system, as shown by the magnetic symptoms. See Muller's Archives, Nos. 2 and 3, 1844. These confirmations, with that of the magnetic machine, of the correctness and importance of the use of magnetic remedies in this class of diseases, gives our magnetic practice a most extraordinary triumph over the old astrological practice of the schools.

We many years since discovered with the magnetic symptoms (by which tubercular disease is distinguished in little children with the same certainty as in adults), a direct connection between the posterior spinal nerves and the ganglionic or sympathetic system of nerves connected with the organs, which connection has been constantly denied by the advocates of the ridiculous notion of referring tubercular disease of the organs to "spinal disease"—"spinal irritation"—"nervous affections of the spine"—"spinal neuralgia," &c., with all their horribly torturing appliances. We also traced this connection with CLAIRVOYANTS, and Volkmann and Bidder have now traced it with the microscope; and as this connection is now confirmed by foreign authority, it will be taught in our medical colleges, in connection with the magnetic symptoms, as soon as the conceited professors of these schools can be replaced by men who have talents and industry to keep pace with the improvements in our profession. The quackery which these professors have practised and disseminated in their lectures, and the amount of suffering they have inflicted upon their patients, while they were literally groaning under the weight of their KNOWLEDGE OF "SPINAL DISEASE"—"SPINAL IRRITATION"—"NERVOUS AFFECTIONS OF THE SPINE"—"SPINAL NEURALGIA," &c., which it is now seen were never favored with a real existence, is absolutely appalling; yet they have the vanity to establish rules of practice, and the barefaced effrontery to denounce every physician who varies from them.

In chronic tubercula, the fluids which nourish and support the solids of the system, are changed from a healthy to an unhealthy and unnatural state

The *secretions* which are conveyed to the heart are thicker, and the blood is at first thicker, and has always a darker color than natural.

The *excretions* from the stomach, pancreas, liver, intestines, kidneys, and skin, become more or less unhealthy, when generally constipation first, and then diarrhœa, sometimes supervenes.

On commencing the use of the magnetic or magnetized gold pills, the secretions become thinner, and the color of the blood becomes more florid, imparting, in from one to three weeks, a more florid and natural color to the skin. In from one to three weeks, the motions of the bowels generally become regular, and in the meantime they should be kept so with the daily use of small doses of medicine, or as long as they are required. The only effects observed from the use of these pills, are the gradual disappearance of the disease, and improvement in the general health.

Tubercular disease is propagated from one part of the system to another, is slow in its progress, and necessarily so in its cure; yet children under ten years, and adults who are very susceptible to mesmeric or magnetic influence, recover their health very fast under the use of these pills. The time required to cure any given case depends, therefore, not only on the susceptibility to this influence, but upon the stage of the disease, and the progress it has made. One box of the pills, which will last a patient from four to five months, is generally sufficient for a case in the first stage of the disease, and it is sometimes all that is required in cases in the last stage; but these last, and especially of those who are insusceptible to magnetic influence, generally require two

or three boxes, and there are a few cases that require four or five boxes, before the health is entirely re-established.

In cases of disease of the organs in the *last* stage, with *great* tenderness along the spine, and in cases of distortions of the spine, backwards or forwards, and in white swellings of the joints, a *magnetic* plaster is applied along the spine, and also over the white swellings.

We have used these remedies 35 years, with a success that justly entitles them to the character of a specific, as they have cured every case in the first stage of the disease, including tubercular consumption, and a great majority of cases in the last stage.

The specific character of these remedies is now well known to a great number of physicians in the Union, many of whom are now using them in their practice, while others continue to use, by authority, the long-acknowledged futile remedies of the schools, and consequently entail upon confiding families an enormous amount of suffering and bereavement.

If a person has tubercular disease requiring these remedies, more or less tenderness will be felt on applying pressure with the thumb on the ganglions of the spinal nerves in the intervertebral spaces along each side of the spine. Any person of common sense can determine this fact. It is no matter whether there are one or more places where tenderness is found, or one or more organs or limbs are diseased, or which organs or limbs are diseased, as the curative process proceeds, under the use of these remedies, in one and all of the organs and limbs at the same time.

The ganglions of the middle portions of the neck are

connected with the muscles of the limbs and body, and the others with the organs, &c.

Physicians who are not well acquainted with these *magnetic* symptoms, are necessarily entirely ignorant of the proper remedies for them, and consequently should never be allowed to interfere in the treatment.*

Tubercular disease is entailed on a great many families by the frequent changes of temperature, and by the abuse of mercury, the taint or seeds of which are uniformly destroyed by the use of these pills, in a safe and satisfactory manner.

In arranging the remedies for chronic mucosis, as well as for chronic serosis, the magnetic machine has been placed in the last rank, not on account of its less importance, but for the purpose of presenting a reversed order of this remedy in chronic diseases.

Chronic Mucosis or atrophia, attacks and pervades the mucous membranes or surfaces in every part of the system, including the muscles; as chronic serosis or tubercula does the serous membranes or surfaces, including the muscles, and is always distinguished by chronic or slow disease, and the *absence* of pain and of the magnetic symptoms. Such patients are, however, sometimes affected with *aching* sensations from overdoing, changes of temperature, or from colds, from which the disease is often produced. It sometimes (although rarely,) accompanies tubercula in some of its stages, and is sometimes, and in these cases, the sequel of it—the tuberculations having

* Incipient consumption is frequently detected by these symptoms, even before the cough commences, when no time should be lost in commencing the use of these remedies.

disappeared by the action of the remedies for tubercula, while the mucous disease has remained stationary.

The specific remedies for chronic mucosis are Hard Bal. Copavia, Cubebs, and Ext. Hyosiamus, and Carb. Amonia. They should be prepared for use according to the following formula.

R. Hard Bal. Copa and Cubebs, ℥iiss. Ext. Hyos. ℥ss. Carb. Amonia, ℥ss. Make 100 pills.

Dose. One pill after breakfast, and another after tea.

No effect is noticed from the use of these, except a steady improvement in the general health. No other medicine is absolutely required in this disease—*no matter what part of the system is affected by it*. We may however give other medicine temporarily to remove any urgent symptoms that may appear from changes of temperature—from colds, or from overdoing.

In the cases in which this disease is complicated with tubercula, the remedies for the latter disease should be used at the same time, and generally one mucous pill after breakfast, and a serous or magnetised gold pill after tea, will be sufficient.

When in some rare cases tubercular disease has apparently disappeared or nearly so, but the patient does not gain strength, but remains feeble and languid, there will be some reason to apprehend the development of mucosis, and the necessity of the use of the mucosis instead of the gold pills. Under such circumstances a clairvoyant should be consulted who would give the required information; and when the

mucous pills are required, such patients regain their health with great rapidity under their use.

We should observe here that in the treatment of this disease, as well as of tubercula, the magnetic machine should never be forgotten—that in the first stages of these diseases patients recover their health much faster than under the combined influence of this instrument and these remedies, and that in their last stages it is in many cases indispensable to a successful treatment.

Finally, on a critical or fair examination of this little work, it will be seen that we have simplified the theory and practice of medicine in the most extraordinary manner, and that the success of this new or magnetic practice, has not only been also most extraordinary, but as anticipated, its results—its simplicity and its power often excite the most enthusiastic expressions of admiration and astonishment.

INDEX OF ABBREVIATIONS, MEDICINES, AND THEIR DOSES FOR ADULTS.

In cases of Children, they must be reduced, more or less, according to age: and diluted with, or dissolved in, water.

Acid, N...	Acid, Nitric.....	Di.	Dose, 3 to 10 drops
Acid, P...	Acid, Phosphoric	" ..	1.. 5 "
Acid, S....	Acid, Sulphuric	" ..	3.. 10 "
Acon.	Aconite Napellus.....	" ..	3.. 10 "
Ant. P....	Antimony Phosphate ...	P. ..	3.. 6 gr.
Ant. V....	Antimony Vivum	" ..	3.. 6 "
Arn.	Arnica.....	Di. ..	3.. 10 dr.
Aur....	Aurum, Gold Chloride..	P. ..	$\frac{1}{2}$.. $\frac{1}{2}$ gr.
Am. C....	Ammonia Carbonate....	" ..	1.. 3 "
Am. M. ..	Ammonia Muriate	" ..	1.. 5 "
Asa....	Assafœtida	Gl. ..	3.. 10 "
Ars.....	Arsenic	" ..	3.. 10 "
Bell....	Belladonna	Di. ..	3.. 10 dr.
Bry....	Bryonia.....	" ..	3.. 10 "
Can....	Cannabis, Indian Hemp.	" ..	3.. 10 "
Cham....	Chamomilla	" ..	3.. 10 "
Colch....	Colchicum, Sem.....	" ..	5.. 30 "
China....	Cinchona	T. ..	5.. 30 "
Canth....	Cantharides.....	Di. ..	3.. 5 "
Coni. M...	Conium Maculatum	" ..	5.. 10 "
Cast. O...	Castor Oil.....	" ..	$\frac{1}{2}$.. 2 oz.
Caus....	Caustic Potash.....	Gl. ..	3.. 10 "
Cina....	Wormseed.....	T. ..	1.. 5 dr.
Coch....	Cochineal.....	" ..	1.. 5 "
Colo... ..	Colocynth	Di. ..	1.. 5 "
Crot. O...	Croton Oil	" ..	3.. 10 "
Cal. C....	Calcaria Carbonica	P. ..	3.. 10 gr.
Carbo. V..	Carbon, Vegetable	" ..	3.. 10 "
Carbo. A..	Carbon, Animal	" ..	3.. 10 "
Coc. I....	Coculus Indicus.....	Di. ..	3.. 10 "
Cinna.. ..	Cinnamon	T. ..	3.. 10 dr.
Creos....	Creosote	Di. ..	1.. 3 "
Copa.	Copaiva	" ..	3.. 10 "
Canad. B.	Canada Bals. Fir	" ..	1.. 5 "
Cub....	Cubebs	T. ..	1.. 5 "
Cap.....	Capsicum (Gargle).....	" ..	3.. 10 "
Di.	Dilution.		

Dr.	Drops.			
Epis.	Epispastic (Blister)			
Elat.	Elaterium.	Di.	Dose, 1 to 5 dr.	
Gold M. ...	Mag. Comp. Chlo. Pills. .	..	1.. 2	
Gl.	Globules.			
Hep.	Hepar. Sulphur.	P.	.. 1.. 5 gr.	
Gr.	Grains.			
Hyos.	Hyosciamus.	Di.	.. 3.. 5 dr.	
Iod.	Iodine.	"	.. 5..10 "	
Iod. P.	Iodide Potash.	P.	.. 1.. 5 gr.	
Ipecac. ...	Ipecacuanha.	Di.	.. 3..10 dr.	
Ignat.	Ignatia.	"	.. 3.. 5 "	
Iron M. ...	Iron Muriate.	T.	.. 3..10 "	
Jalap.	Jalap, Tinct.	"	.. 5..30 "	
Kino.	Kino, Gum.	"	.. 5..30 "	
Lead	Lead Acetate plumb.	Gl.	.. 5..10 "	
Lyc.	Lycopodium.	T.	.. 5..10 "	
Lob.	Lobelia Inflata.	"	.. 1.. 2 "	
Mag.	Magnetise.			
Merc. S. ...	Mercuris Solubilis.	P.	.. 1.. 5 gr.	
Mag. M. ...	Magnetic Machine.			
Mor.	Morphine.	Sol.	.. 3..10 dr.	
Musk.	Musk.	Gl.	.. 3..10 "	
Mes.	Mesmerisin.			
Magne. ...	Magnesia.	5..30 gr.	
Merc. V. ...	Mercury Vivum.	3..10 "	
Mus.	Mustard.			
Nit. P.	Nitrate Potash.			
Nit. S.	Nitrate Silver.			
Nux.	Nux Vomica.	Di.	.. 1.. 5 dr.	
Nut G.	Nut Galls (Gargle)	T.	.. 5..30 "	
P.	Powder.			
Opi.	Opium, Tincture.	T.	.. 5..30 "	
Phos. T. ...	Tinct. of Phosphorus.	Di.	.. 3..10 "	
Puls.	Pulsatilla.	"	.. 5..10 "	
Qui.	Quinia, Quinine.	Sol.	.. 5..10 "	
Rhus.	Rhus. Tox.	T.	.. 3.. 5 "	
Rhei.	Rhubarb.	"	.. 5..60 "	
Sec. C. ...	Spurred Rye.	"	.. 5..20 "	
Stram. ...	Stramonium.	Di.	.. 1.. 5 "	
Sil.	Silicia, Silex.	T.	.. 3..10 "	
Sang. C. ...	Blood-Root.	"	.. 3..10 "	
Sal. T.	Salts Tartar.	Gl.	.. 5..10 "	

Scil.....	Scillæ Squills	T.	Dose, 1 to 10 dr
Sep.....	Sepia	Gl.	.. 5..10 "
Sol.	Solution.		
Sul.....	Sulphur.....	..	1..10 gr.
Sul. T....	Tinct. Sulphur	3..10 dr.
T.	Tincture.		
Tart.....	Emetic Tartar	P.	.. 1.. 5 gr.
Tin.	Tin. Muriate.....	"	.. $\frac{1}{8}$.. $\frac{1}{4}$ "
Tart. O...	Emetic Tartar Ointment.		
Ver.	Veratrum	Gl.	.. 3..10 dr.
Zinc.....	Zinc, Sulphate.		

MEDICINES IN ACUTE SEROSIS.

SYMPTOMS—*Acute pain produced by pressure upon the ganglions of the spinal nerves.*

DIET VERY LOW.

1. Aconite. Colds, fever, sore throat, hemorrhage.
2. Antimony phosphate. Fever, bilious.
3. Arnica. Shocks, bruises, sprains, burns.
4. Belladonna. Pain, spasms, eruptive fevers.
5. Cannabis. Pain in the urethra and bladder, dropsy.
6. Chamomilla. Acute pains, spasms, irritation.
7. Colchicum. Acute pain, spasms.
8. China. Pains, intermittent, debility.
9. Emetic Tartar. Pain in chest or stomach.
10. Hyosciamus. Wheezing cough, dizziness.
11. Mercurius Sol. Pain, tenesmus, dysentery.
12. Magnetic Machine. Acute pains, spasms.
13. Morphine. Irritation, cough at night, diarrhœa,
14. Musk. Irritation, fainting, convulsions.
15. Nux. V. Colds in head, constipation, paralysis.
16. Opium. Pain, irritation, diarrhœa, dysentery.
17. Pulsatilla. Pain worse at night, palpitations.
18. Quinia—Quinine. Fever intermittent, debility.
19. Rhus Tox. Pain in joints or limbs, eruptions.
20. Secale Corn. Spasms, hemorrhage, parturition.
21. Stramonium. Pain, spasms, dilated pupils.
22. Colocynth. Spasmodic and aching pains, colic.
23. Mustard-Plaster. Acute pains, spasms.
24. Epispastic-Blister. Acute pains, spasms.
- a. Phos. Excessive excretions.

A. The magnetic machine, aconite, and colchicum are the specific remedies for acute serosis, or acute diseases, or inflammations of the serous membranes or surfaces, including the muscles, and for acute pain in any part of the system, and reduces such pains and inflammations in the most prompt and satisfactory manner. There are, however, local and concomitant symptoms in many of these cases which require their specific remedies, and which should be given at the same time or alternated with them, as bella donna when the throat is swollen, mercurius solubilis in tenesmus, cantharides in painful micturition, opium or morphine in excessive irritation or frequent recurrence of pain, &c

Acute Serosis.

SYMPTOMS—*Acute pain produced by pressure upon the ganglions of the spinal nerves. Acute diseases of the serous membranes, tissues, and surfaces. Acute inflammations—rapid in their progress.*

DIET VERY LOW.

25. Brain. Mag. m. acon. colch. hyos. bell. puls. phos.
26. Eys. Mag. m. acon. bell. nux. hyos. merc. s.
27. Ears. Mag. m. acon. colch. puls. cham. bell. opi.
28. Nose. Mag. m. acon. nux. puls. rhus. bell.
29. Teeth. Mag. m. acon. puls. cham. colch. mus.
30. Tongue. Mag. m. acon. bell. can. merc. s. ars.
31. Throat. Mag. m. acon. bell. must. nut. galls.
32. Larynx. Mag. m. acon. tart. scil. hyos. bell. mus.
33. Lungs. Mag. m. acon. colch. tart. hyos. phos.
34. Heart. Mag. m. acon. colch. puls. bell. dig. phos.
35. Pleura. Mag. m. colch. acon. hyos. mus.
36. Stomach. Mag. m. colch. tart. o. colo. acon. nux.
37. Intestines. Mag. m. acon. tart. o. colch. bell.
38. Cæcum. Mag. m. acon. tart. o. ant. p. gold m.
39. Anus. Mag. m. merc. s. colch. sec. c. mor. gold m.
40. Liver. Mag. m. colch. nux. puls. bell. gold m.
41. Spleen. Mag. m. acon. colch. puls. am. c. bell.
42. Skin. Mag. m. bell. rhus. sul. ars.
43. Kidneys. Mag. m. acon. colch. sec. c. can. bell.
44. Bladder. Mag. m. colch. hyos. sec. c. cann. canth.
45. Uterus. Mag. m. colch. opi. sec. c. merc. s. phos. l.
46. Vagina. Mag. m. acon. merc. s. bell. can. gold m.
47. Muscles. Mag. m. acon. colch. bell. nux. opi. phos.
48. Joints. Mag. m. colch. nux. bell. gold m. phos. t.
49. Limbs. Mag. m. colch. nux. bell. gold m. phos. t.
50. Breasts. Mag. m. colch. nux. bell. gold m. phos. t.

MEDICINES IN CHRONIC SEROSIS.

SYMPTOMS—*Tenderness more or less severe, produced by pressure upon the ganglions of the spinal nerves—disease slow in its progress.*

DIET VERY FULL.

51. Acid Nitric. Tubercular and scaly eruptions,
- " Muriatic. Fever typhus.
52. " Phosphoric. Excessive excretions.
53. " Sulphuric. Night sweats, scaly diseases.
54. Arsenic. Intermittents, dropsies, chorea, eruptions.
55. Aurum Gold chloride. Pains in bones and muscles.
56. Cannabis. Pain, retention of urine, dropsies.
57. Cantharides. Pains in bladder and urethra.
58. China. Quina. Pains intermittent, debility.
59. Conium. m. Carcinomia. cancer.
60. Cuprum. Copper. Emetic.
61. Gold. m. Pills. Tubercula.
62. Iodine. Tubercula.
63. Iodide Potash. Tubercula.
64. Magnetic Machine. Tubercula.
65. Magnetised Rings. Tubercula.
66. Mesmerism. Tubercula.
67. Silicia, Silex. Tubercula.
68. Silver, Nitrate. Escarotic gargle.
69. Sang. Canad., Blood Root. Tubercula of lungs.
70. Spongia Tosta. Tubercula,
71. Tin, Muriate. Tubercula.
72. Bitumen-Plaster, mag. Tubercula.
73. R. Rum 2 oz., Honey oz., mix. p. 157.
74. Sulphur, Psora, Itch.

B. The magnetised gold pills and plaster, and the magnetic machine, are the specific remedies for chronic serosis, tubercula or chronic diseases of the serous membranes or surfaces. including the muscles. They cure every case in the first stage of the disease no matter what part of the system is affected by it, and about ninety-five in every hundred in the last stage, including tubercular consumption and white swellings.

MEDICINES IN ACUTE MUCCOSIS.

SYMPTOMS.—*Aching sensations. No pain produced by pressure on the ganglions of the spinal nerves. Acute disease of the mucous membranes, tissues, and surfaces. Acute inflammations: rapid in their progress.*

DIET VERY LOW.

101. Ammonia Carb. Fever, giddy head-ache, catarrh.
102. Ammonia Muriate. Fever, cough, expectoration.
103. Ammoniac Gum. Fever, no pain.
104. Antimony Viv. Fever, nausea, vomiting.
105. Bryonia. Aching pains, constipation.
106. Castor Oil. Purgatives.
107. Caustic Gum. Catarrh, hoarseness, expectoration.
108. China. Intermittents, debility.
109. Cina. Fever, cough, nausea, worms.
110. Cochineal. Spasmodic cough, expectoration.
111. Colocynth. Aching pain, spasms, colic.
112. Croton Oil. Cathartic, dropsies.
113. Elaterium. Cathartic, dropsies.
114. Gum Ammoniac (Oxyme). Suffocatic cough, expectoration.
115. Jalap. Cathartic.
116. Ipecacuanha. Nausea, retching, diarrhœa.
117. Magnesia Calcined. Constipation, acidity.
118. Mag. Machine. Fevers, aching, griping, spasms.
- 119.
120. Merc. Viv. Fever, dysentery, diarrhœa.
121. Nitrate Potash. Aching in muscles.
122. Opium. Diarrhœa.
123. Rheum. Constipation, diarrhœa.
124. Scammony. Cathartic.
125. Salts Tartar. Hoarseness, cough, leucorrhœa, acidity.
126. Scillæ, Squills. Suffocating cough.
127. Camphor.
128. Pearl-ash.

R. Gum Ammoniac, 3j.; Cubebs, 3ss.; Hot Water, ʒviii., and when nearly cold add Muriate Ammonia, 3ss.; Honey or Sugar, one table spoonful. Mix. Dose, one table spoonful once in two, three or four hours, according to the intensity of the disease and the urgency of the symptoms. This is the *best remedy* in mucosis when it is affecting any of the organs, and with the magnetic machine cures every case.

Acute Mucosis.

SYMPTOMS—*Aching sensations — acute. No pain produced by pressure on the ganglions of the spinal nerves. Acute diseases of the mucous membranes, tissues, and surfaces. Acute inflammations.*

DIET VERY LOW.

- 130. Brain. Mag. m. am. m. t. caus. nux. qui.
- 131. Eyes. Mag. m. caus. bry. merc. v. qui.
- 132. Ears. Mag. m. bry. caus. nux.
- 133. Nose. Mag. m. caus. nux. merc. v. ars.
- 134. Mouth. Mag. m. caus. ars.
- 135. Throat. Mag. m. am. m. caus. merc. v.
- 136. Larynx. Mag. m. am. m. sal. t. coch.
- 137. Lungs. Mag. m. gum am. (oxy.), am. m. caus.
- 138. Heart. Mag. m. nit. p. nux. bry.
- 139. Stomach. Mag. m. ipecac. colo. caus. nux. qui. ars.
- 140. Intestines. Mag. m. colo. nux. merc. s. opi. qui. ars.
- 141. Anus. Mag. m. merc. v. nux. opi. china. ars.
- 142. Liver. Mag. m. ant. v. caus. merc. v. qui.
- 143. Kidneys. Mag. m. nit. p. bry. ars. qui.
- 144. Bladder. Mag. m. ant. v. ars. can. qui.
- 145. Uterus. Mag. m. ipecac. sal. t. coch. qui.
- 146. Vagina. Mag. m. sal. t. coch. merc. v. qui.
- 147. Muscles. Mag. m. nit. p. rhus. nux. qui.
- 148. Urethra. Mag. m. nux. cub. can. merc. s.

MEDICINES IN CHRONIC MUCOSIS.

SYMPTOMS.—*Aching sensations, intermittent. No pain produced by pressure on the ganglions of the spinal nerves. Chronic disease of the mucous membranes, tissues, and surfaces. Chronic inflammations.*

DIET VERY FULL.

149. Assafœtida. Fainting, dizziness, hysteria, vapors.
150. Calcaria Carbonica. Aching sensations.
151. Carbon, Vegetable. Fever, debility.
152. " Animal. Aching sensations, fever.
153. Coccus Ind. Excessive excretions, dizziness.
154. Catechu. Diarrhœa, leucorrhœa.
155. Cinnamon. Hæmorrhage, mucorrhœa.
156. Creosote. Hæmorrhage.
157. Copaiva. Cough, expectoration.
158. Canada Bal. Fir. Cough, expectoration.
159. Cubebs. Cough, expectoration, gonorrhœa.
- 160.
161. Kino. Hæmorrhage.
162. Hepur. Sulphur. Aching sensations.
163. Ignatia. Hysteria, vapors.
164. Iron, Muriate. Aching sensations, debility.
165. Lead, Acetate. Hæmorrhage, constipation.
166. Lycopodium. Aching sensations.
167. Lobelia Inflata. Nausea, constipation.
168. Mag. Machine. Aching sensations.
169. Platina. Excessive excretions.
170. Phosphorus. Excessive excretions.
171. Sepia. Aching in muscles, debility.
172. Sulphur. Aching sensations, eruptions.
173. Tartarum. Constipation, dropsy.
174. Zinc, Sulphate. Emetic.

R. Hard Bal. Copa. and Cubebs, ʒiiss; Ext. Hyos, ʒss; Carb. Amonia. ʒss; make 100 pills. Dose, one pill after breakfast, and another after tea. This is the *best remedy* in chronic mucosis when it is affecting any of the organs or muscles, and with the magnetic machine cures every case in the first, and nearly all or about 95 in every 100 in the last stage of the disease.

Chronic Mucosis.

SYMPTOMS—*Aching sensations, intermittent. Chronic disease of the mucous membranes, tissues, and surfaces. Chronic inflammations.*

DIET VERY FULL.

- 175. Brain. Cal. c. asa. coc. l. lagna. mag. m.
- 176. Eyes. Cal. c. hep. s. lead, a. zinc, s. mag. m.
- 177. Ears. Cal. c. hep. s. nux. iron, m. mag. m.
- 178. Nose. Cal. c. hep. s. nux. calc. mag. m.
- 179. Tongue. Cal. c. cinna. iron, m. mag. m.
- 180. Throat. Cal. c. cinna. iron, m. mag. m.
- 181. Larynx. Cal. c. copa. cub. hyos. colch. mag. m.
- 182. Lungs. Cal. c. copa. cub. hyos. colch. mag. m.
- 183. Heart. Cal. c. coc. i. lagna. iron, m. mag. m.
- 184. Stomach. Cal. c. magne. hep. s. iron, m. nux. mag. m.
- 185. Intestines. Cal. c. magne. cate. iron, m. mag. m.
- 186. Anus. Cal. c. magne. cate. iron, m. mag. m.
- 187. Liver. Cal. c. magne. iron, m. colch. mag. m.
- 188. Kidneys. Cal. c. cub. hyos. colch. iron, m. mag. m.
- 189. Bladder. Copa. cub. hyos. colch. iron, m. mag. m.
- 190. Uterus. Copa. cub. hyos. colch. iron, m. mag. m.
- 191. Vagina. Copa. cub. hyos. colch. iron, m. mag. m.
- 192. Muscles. Nit. p. hep. s. coc. l. asa. mag. m.

ADDENDA.

- 193. Spigelia, Pink Root. Worms.
- 194. Capsicum, Red Pepper.
- 195. Yeast Poultice.
- 196. Mustard, Emetic—quick and safe.
- 197. Nut Galls, Gargle.
- 198. Emetic Tartar, Ointment.

ANATOMY AND PHYSIOLOGY.

It is now more than thirty years since we ascertained by the magnetic symptoms, and by post-mortem examinations, that there was a direct connection between the ganglions of the spinal nerves, and the serous surfaces of the organs, as well as with the muscles. These ganglions were thus found to be connected with the different organs, and with the muscles, in the order described in diagram A.*

The intermediate ganglions are no doubt connected with the different viscera, and a physician of this city has, at our request, directed his attention to this subject. He has been trying to determine these connections by the action of the magnetic machines, and the result thus far makes the probable connections as marked with interrogation points

* Within a very recent period this connection has been demonstrated by actual dissection, and the London Lancet of June 21th, 1843, announced it as a new discovery, that "Volkman and Butler have found by the aid of the microscope that the sympathetic nerves in reality originate in the ganglia; but not only the ganglia of the sympathetic cord, but those also on the POSTERIOR BRANCHES OF THE SPINAL NERVES."

Cervical vertebræ.

Dorsal vertebræ.

Lumbar vertebræ.



SEROSIS

of the head, of the cerebellum, cerebrum, membranes of the brain, throat, eyes, or nose, &c.

of the muscles, tubercular disease of the musculos—rheumatism—white swellings.

of Pleura costalis?

of Lungs and Heart.

of Stomach.

of Duodenum.

of Colon.

of Pancreas?

of Omentum?

of Liver and Spleen.

of Diaphragm?

of Peritoneum?

of Small Intestines.

of Kidneys.

of Uterus, ovaria, prostate gland, vesiculae seminales, and testis.

} of Vagina, &c.

When the Doctor found tenderness on applying pressure over the ganglions, thus marked? he placed the positive button over the ganglion thus indicated; and then passed the negative button over the entire surface of the chest and abdomen, under a moderate power of the instrument, by which sensations, more or less painful, were produced on different parts of these surfaces, and which induced him to locate the connections as above described.

THOMASVILLE, GA., *May 1st, 1845.*

DR. H. H. SHERWOOD.

Dear Sir—Inasmuch as I recently sent you a summary view of the merits of Swedenborg's Animal Kingdom, as taken from a foreign medical periodical, I now send you, in connection therewith, an extract from the work itself—A. K., vol. ii., page 158—in which the principles of motion appertaining to the human organi-

ation are explicitly stated, and apparently in direct accordance with those which you are now advocating. Should they meet an approval, please insert them in your Dissector, with such comments as you may deem proper.

Respectfully yours, &c.

WM. HUNNEWELL, M. D.

"It is a truth constantly presented to us as the result of all our analytic investigations, that every action of the cerebrum and cerebellum is determined through the fibres; and that the fibres cannot be determined into act, excepting by their beginnings or principles; in short, by the organs that are prefixed to the fibres. The latter must certainly be excited to motion by their principles, and commence and describe their motions in this way. It is absurd to suppose that any action can begin in the middle of a fibre, and not in its first terminus. If, then, it begin in the first organs, it must inevitably begin in the cortical glands; for the fibres commence, and are conceived and produced, in those glands, and the arterial vessels of the cerebrum terminate also in them. Hence, if the principles of motion exist in them, according to all physical and philosophical laws, as mutually confirmed by and confirming each other, those principles must necessarily commence by a kind of *active, living, or locomotive* reciprocal force, that is, by a kind of *expansion and constriction*, or systole and diastole, such as we observe in a gross form in the lungs and heart; for the same conditions are involved, whether the spirit is to be driven through the fibres, or the blood through the vessels. The blood cannot be driven through its arteries without the reciprocal expansion and constriction of the heart; nor can the spirit be driven through the fibres, which are little canals and vessels analogous to the arteries, only more pure, without the reciprocal expansion and constriction of the cortical glands of the cerebrum; which on this account deserve the appellation of pure corcula, or little hearts. Assuming or granting these points, the necessary consequence is, that every time the cortical and cineriterous substance of the cerebrum, cerebellum, medulla oblongata, and medulla spinalis, contracts or constricts itself, the whole mass

of those parts sinks down, and undergoes systole ; but, on the other hand, undergoes diastole, when the same substance, I mean the whole congeries, expands. This is the animation of the cerebrum—using the term cerebrum in its widest acceptation—that corresponds to the respiration of the lungs. We must now proceed a step farther. If the animal or nervous spirit, at the intervals of the constriction of these organic substances—of the little hearts of the cerebrum—is expressed by the cerebrum through the nerves and nervous fibres, of course it is expressed by the cerebellum into its grand sympathetic nerves, the par vagum and the intercostals : and granting this, it follows that these nerves act during the same intervals upon the fibres of the pulmonary plexus, and upon the fibres of the costal nerves ; which cannot fail on the instant to act upon their muscles and membranes ; nor the latter to act upon the ribs, and this upon the internal structure of the lungs. Hence, it follows that the animations of the cerebrum (using the term here again in its widest sense) must necessarily be coincident with the respiration of the lungs : and the fact is still more plainly declared by the influx of the fibres of the above-mentioned cerebellar nerves, the par vagum, and the intercostal, into all the viscera of the abdomen ; and by the motion of those viscera agreeing exactly, and keeping perfect time, with the respiratory motions of the lungs, as proved in detail in our Analysis.”—*Animal Kingdom*, vol. ii., pp. 158-9.

Each convolution of the brain or phrenological organ is divided into two equal halves, by a very thin nuri-
lema, on the opposite sides of which the different, or diverging and converging, fibres are attached. Swedenborg, a hundred years ago, called the convolutions of the brain, organs, cortical glands, and corcula, or little hearts. He was also familiar with the fact, that motion is produced by the action of two forces. Wonder how many hundred years it will require to beat this knowledge into the heads of the professors of our medical colleges!—EDIT. DIS.



COROLLARIES.

1. "During health, the system is animated by a *spiritual, self moved, vital power* which preserves it in harmonious order."

2. "It is only by means of the *spiritual influence* of the morbid agent, that our *spiritual vital power*, can be diseased, and in like manner, only by the *spiritual (dynamic)* operation of medicine that health can be restored."

3. "The homœopathic healing art develops for its purpose the IMMATERIAL (DYNAMIC) VIRTUES OF MEDICINAL SUBSTANCES, and to a degree previously unheard of, by means of a *peculiar* and HITHERTO UNTRIED PROCESS. By this process it is that they become penetrating, operative, and remedial, even those that, in a *natural or crude state*, betrayed not the least medicinal power upon the human system."—

HAHNEMANN.

It was the magnetizing process by which Hahnemann increased the power of his medicines, and the same as that directed and practiced by Clairvoyants in the mesmeric state.

Hahnemann's Directions for Magnetising Medicines.

"If *two* drops of a mixture of equal parts of alcohol and the recent juice of any medicinal plant be diluted with *ninety-eight* drops of alcohol in a vial containing *one hundred and thirty* drops, and the whole *twice* shaken together, the medicine becomes exalted in energy to the *first* development of power, or, as it may be denominated, the *first* potency. The process is to be continued through *twenty-nine* additional vials, each of equal capacity with the first, and each containing *ninety-nine* drops of spirits of wine; so that every successive vial after the *first*, being furnished with *one* drop from the vial of dilution immediately preceding (which had just been *twice shaken*), is, in its turn to be *shaken twice*, remembering to number the dilution of *each* vial upon the cork as the operation proceeds. The manipulations are to be conducted thus through all the vials, from the first up to the *thirtieth* or *decillionth* development of power, which is the one in most general use.

"All other medicinal substances, excepting sulphur, which, of later years, has been employed only in the highly diluted tincture (X), such, for example, as the metals, either pure, or oxydized, or in the form of sulphurets, and other minerals, petroleum, phosphorus, the parts or juices of plants, obtainable only in their dry or inspissated state, animal substances, neutral salts, &c.,—one and all were, in the first place, exalted in energy by attenuation in the form of a powder, by means of *three hours* trituration in a mortar, to the *millionth* degree. Of this *one* grain was then dissolved and brought through twenty-seven vials, by a process similar to that employed in the case of the vegetable juices, up to the *thirtieth* development of power."—*Organon*, p. 200.

When I make use of the word *intimately*, I mean to say, that by *shaking* a drop of liquid medicine with ninety nine drops of alcohol *once*—that is to say, by taking the vial in the hand which contains the whole, and imparting to it a *rapid motion*, by a *single* powerful

stroke of the arm *descending*,* I shall then obtain an exact mixture of them; but that two, three, or ten such movements would render the mixture much closer—that is to say, they would develope the medicinal virtues still further, making them, as it were, more potent, and *their action on the nerves* much more penetrating. In proceeding, therefore, to the dilution of medicinal substances, it is *wrong* to give the twenty or thirty successive attenuating glasses *more than two shakes*, where it is merely intended to develope the power of the medicine in a moderate degree. It would also be well in the attenuation of powders, not to rub them down too much in the mortar; thus, for example, when it is requisite to mix *one* grain of a medicinal substance in its entire state with *ninety-nine* grains of sugar of milk, it ought to be rubbed down with *force* during *one hour only*, and the same space of time should not be exceeded in the subsequent triturations, in order that the power of the medicine may not be carried to too great an extent.”—*Organon*, p. 207.

“The smallest homœopathic dose, when properly applied, effects wonders. It not unfrequently occurs, that patients are overwhelmed, by incompetent homœopaths, with a rapid succession of remedies, which, though well selected and of the highest potency, yet produce such a state of excessive irritability, that the life of the patient is placed in jeopardy, and another dose, however mild, may prove fatal. Under such circumstances, *the hand of the mesmeriser gently sliding down*, and frequently *touching the part affected*, produces an *uniform* distribution of the *vital power* through the system, and *rest, sleep and health* are restored.”—*Organon*, p. 211.

Latterly, Hahnemann, and homœopaths generally, have used much larger quantities of medicine in their first attenuations, as will be seen from the following extract from Jahr’s Pharmacopœia.

“OF THE PREPARATION OF THE ATTENUATIONS.

“We have already said, on many occasions, that the

* We see clairvoyants in the somniscient state, magnetize water by the *passes* descending.

homœopathic attenuations are obtained, in general, in such a way, that the first contains one grain (5 centigrammes), or one drop of the medicine to attenuate, mingled with 100 grains (5 grammes) of sugar of milk, or 100 drops of alcohol; and that after sufficient triturations and successions, the second is obtained in manipulating, in the same manner, the 100th part of the 1st with 100 new parts of vehicle; the 3d, in submitting to the same process the 100th part of the second; and so on to the 20th. This way of making the attenuations, in the proportion of 1 to 100, is that of Hahnemann, and which is always understood, when we indicate an attenuation by its number. Latterly, however, it has been found more suitable to make the mixtures only in the proportion of 10 to 100, so that instead of mingling but *one* grain or *one* drop with 100 parts of vehicle, we mingle each time 10. This process has the advantage of giving more certitude, that in each preparation the molecules of the medicine are well mingled with those of the vehicle, though, on the other hand, it permits less extension. But as we can easily repair this inconvenience, in preparing each time two attenuations, in the proportion of 10 to 100, instead of 1 to 100, we recommend this process to all the homœopathic physicians and pharmacutists; in cautioning, however, these last, that every time that they shall make use of any other proportion than that of 1 to 100, they shall take care to indicate it on the label of the preparations, in order that we may know in what proportion the number, which each attenuation bears, is made.

“The attenuations obtained in the proportion of 10 to 100, are much more sure than those of 1 to 100.”

Jahr also directs the attenuations to be strongly shaken from 100 to 200 times, instead of *twice*, as formerly practised by Hahnemann.—See page 90 to 94, also page 126.

Synopsis of the Homœopathic Practice of Medicine.

* * *The figures refer to the medicines for each case in the corresponding numbers, from page 239 to 246.*

Abortion, Premature birth.....	6, 116, 20, 15
Abscess in the Chest.....	} 61, 64, 68, 62, 150, 11
“ In the Breast.....	
“ In the Brain.....	
“ in Joints.....	
“ in Kidney.....	
“ Lumbar.....	
“ of Prostate.....	
“ Psoas.....	
“ Labia Pudenda.....	
Achor, A small pustule, ending in a scab.....	53
Acne, Pimples on the face.....	61, 54, 64, 62, 63, 67
Alopecia, Loss of hair, baldness.....	150, 170, 172, 64
After Pains, after confinement.....	3, 6, 17, 4, 15
Amaurosis, Paralysis of optic nerve.....	64
Amenorrhœa, Chlorosis.....	94
Angina Maligna, Putrid sore throat.....	101, 51, 58, 194
Anasarca, Dropsy of cellular tissue.....	54, 112, 4
Aneurism, Varix.....	67, 17
Angina Pectoris, Disturbances of the heart..	1, 116, 149
Aphonia, Loss of voice.....	81
Aphæ, Thrush, sprue, white ulcers in the mouth..	54
Apoplexy, Sudden cessation of sense and voluntary motion.....	25
Anus, Pain in the.....	172
Ascarides, Small worms.....	1, 150, 108, 15, 11
Ascitis, Dropsy in abdomen.....	112, 168, 111, 113, 115
Asphyxia, Suspended animation.....	168
Asthma, Difficult breathing, pericardial.....	182
Atrophy, Wasting of the flesh, marasmus.....	168, 67
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Black Jaundice.....	
Bladder, Inflammation of.....	44

Bleeding from Nose ..	1, 3
“ from Lungs.....	1, 165, 3
“ from Stomach	20, 1, 54, 3
“ from Bowels	20
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Bronchitis, Acute	137
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“ of the Lip	
“ of the Nose	
“ of the Breasts	
“ of the Uterus.....	
“ of the Anus	
Carbuncle, Gangrenous serosis	195, 12, 8
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Cardialgia, Heart-burn	116, 15, 17
Carditis, Serosis of the heart	34
Caries, Ulceration of bones.....	61, 62, 64, 67
Catamenia, Suppressed	1, 17, 15, 21
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“ Excessive	94, 161, 53, 150, 20
“ Deficient.....	94
Catalepsy, Sudden fit, apoplectic	61, 64, 66, 75
Cataract, Opacity of crystalline lens	64, 172, 17, 5
Catarrh, Cold in the head.....	15, 17, 6, 116
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The Magnetic Machine in intermittent Fevers.

We have already described the prompt and efficient action of this machine in subduing the most violent paroxysms of fever, but were not, at that time, aware of its equal efficiency in the cold stage of intermittent fevers. We can now, on the authority of a number of physicians, as well as private individuals, confidently recommend its use in this case, as the cold chills are mitigated immediately, and cease altogether, in a few minutes after the commencement of the action of the magnetic machine. We are, moreover, assured that the chills, and consequently the fever, very rarely return, this circumstance, therefore, is well worthy of the attention of physicians in the Western and Southern States, and indeed wherever this disease is prevalent.

The Muscles of Animal and of Organic Life, and their Connection with the Spinal Nerves.

The posterior cervical nerves are connected everywhere with the positive or outer surfaces of the muscles, and membranes of *animal life*, or those of the body and limbs; while the anterior cervical nerves are connected with the inner or negative surfaces of these muscles and membranes, and as they are more frequently and more extensively diseased than any other part of the system from obvious causes, as is well known to clairvoyants, a knowledge of these facts and of *these muscles* and membranes, is obviously a matter of great importance both to the physician and his patients.

The sub-occipital posterior dorsal, lumbar and sacral nerves are connected with the positive, serous or outer surfaces of the muscles and membranes of *organic life*, or those of the different organs, as the brain, lungs, stomach, and uterus, &c.; while the anterior dorsal, lumbar, and sacral nerves are connected with the negative, mucous or inner surfaces of these muscles and membranes.

In magnetising, therefore, the muscles and membranes of *animal life*, we may do so by placing one button over the cervical nerves, and the other in the hollow of one foot, in the palm of one hand, or on the point of pain or of disease; but in magnetizing the muscles and membranes of *organic life* or of the organs, one button must be placed over the ganglion of the posterior spinal nerve connected with the diseased organ; while the other is placed or moved over the pole or poles of the said organ.

Any other manner of magnetizing must necessarily be empirical, futile and very uncertain in its effects; and the importance of this subject has induced us to describe these connections of the nerves with the muscles, and also to give a full description of the muscles of animal and of organic life; besides the connexions and extent of these surfaces account for the extraordinary effects often produced by the magnetic machine, or magnepathy and hydropathy.

On the Muscles.

Muscles are the moving organs of the animal frame ; they constitute by their size and number the great bulk of the body, upon which they bestow form and symmetry. In the limbs they are situated around the bones, which they invest and defend, while they form to some of the joints a principal protection. In the trunk they are spread out to enclose cavities, and constitute a defensive wall capable of yielding to internal pressure, and again returning to its original position.

Their color presents the deep red which is characteristic of flesh, and their form is variously modified, to execute the varied range of movements which they are required to effect.

Muscle is composed of a number of parallel fibres placed side by side, and supported and held together by a delicate web of areolar tissue ; so that, if it were possible to remove the muscular substance, we should have remaining a beautiful reticular framework, possessing the exact form and size of the muscle without its color and solidity. Towards the extremity of the organ the muscular fibre ceases, and the areolar structure becomes aggregated and modified, so as to constitute those glistening fibres and cords by which the muscle is tied to the surface of bone, and which are called *tendons*. Almost every muscle in the body is connected with bone, either by tendinous fibres, or by an aggregation of those fibres constituting a tendon ; and the union is so firm, that, under extreme violence, the bone itself rather breaks than permits of the separation of the tendon from its attachment. In the broad muscles the tendon is spread so as to form an expansion, called *aponeurosis* (ἀπὸ, longè ; νεῦρον,* *nervus*—a nerve widely spread out).

Muscles present various modifications in the ar-

* The ancients named all the white fibres of the body νεῦρα ; the term has since been limited to the nerves.

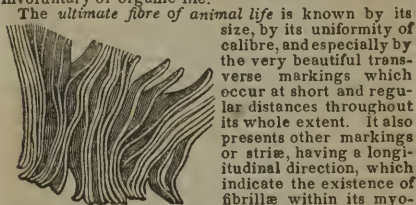
range of their fibres in relation to their tendinous structure. Sometimes they are completely longitudinal, and terminate at each extremity in tendon, the entire muscle being *fusiform* in its shape; in other situations they are disposed like the rays of a fan, converging to a tendinous point, as the temporal, pectoral, glutei. &c., and constitute a *radiate* muscle. Again, they are *penniform*, converging like the plumes of a pen to one side of a tendon, which runs the whole length of the muscle as in the peronei; or *bipenniform*, converging to both sides of the tendon. In other muscles the fibres pass obliquely from the surface of a tendinous expansion spread out on one side, to that of another extended on the opposite side, as in the semi-membranosus; or, they are composed of penniform or bipenniform fasciculi as in the deltoid, and constitute a compound muscle.

The nomenclature of the muscles is defective and confused, and is generally derived from some prominent character which each muscle presents; thus, some are named from their situation, as the tibialis, peroneus; others from their uses, as the flexors, extensors, adductors, abductors, levators, tensors, &c. Some again from their form, as the trapezius, triangularis, deltoid, &c.; and others from their direction, as the rectus, obliquus, transversalis, &c. Certain muscles have received names expressive of their attachments, as the sterno-mastoid, sterno-hyoid, &c.; and others, of their divisions, as the biceps, triceps, digastricus, complexus, &c.

In the description of a muscle we express its attachment by the words "origin" and "insertion;" the term *origin* is generally applied to the more fixed or central attachment, or to the point towards which the motion is directed, while *insertion* is assigned to the more movable point, or to that most distant from the centre; but there are many exceptions to this principle, and as many muscles pull equally by both extremities, the use of such terms must be regarded as purely arbitrary.

In structure, muscle is composed of bundles of fibres of variable size called fasciculi, which are enclosed in a cellular membranous investment or

sheath, and the latter is continuous with the cellular framework of the fibres. Each *fasciculus* is composed of a number of smaller bundles, and these of single fibres, which, from their minute size and independent appearance, have been distinguished by the name of ultimate fibres. The *ultimate fibre* is found by microscopic investigation to be itself a fasciculus (ultimate fasciculus), made up of a number of *ultimate fibrils* enclosed in a delicate sheath or *myolemma*. Two kinds of ultimate muscular fibre exist in the animal economy; viz., that of voluntary or animal life, and that of involuntary or organic life.



The *ultimate fibre of animal life* is known by its size, by its uniformity of calibre, and especially by the very beautiful transverse markings which occur at short and regular distances throughout its whole extent. It also presents other markings or *striæ*, having a longitudinal direction, which indicate the existence of *fibrillæ* within its *myolemma*. The *myolemma*, or investing sheath of the ultimate fibre is thin, structureless and transparent.

The *ultimate fibre of organic life* (100, 4, 5), is a simple homogeneous filament, much smaller than the fibre of animal life, flat, and without transverse markings. Besides these characters, there may generally be seen a dark line or several dark points in its interior, and not unfrequently the entire fibre appears enlarged at irregular distances. These appearances are due to the presence of the unobliterated nuclei of cells from which the fibre was originally developed. The fibres of organic life are collected into fasciculi of various size, and are held together by dark nuclear fibres, similar to those which bind the fasciculi of fibrous tissue.



The development of muscular fibre* is effected by means of the formation of nucleated cells out of an original blastema, and the conversion of those cells, by a process already described, into the tubuli of ultimate fibres, while their contents, by a subsequent developmental action, are transformed into ul-

* 1. A muscular fibre of animal life enclosed in its myolemma ; the transverse and longitudinal striæ are seen.

2. An ultimate fibril of muscular fibre of animal life, according to Mr. Bowman.

3. A muscular fibre of animal life, similar to 1, but more highly magnified. Its myolemma is so thin and transparent, as to permit the ultimate fibrils to be seen through. The true nature of the longitudinal striæ is seen in this fibre, as well as the mode of formation of the transverse striæ.

4. A muscular fibre of organic life, from the urinary bladder, magnified 600 times, linear measure. Two of the nuclei are seen.

5. A muscular fibre of organic life, from the stomach, magnified 600 times. The diameter of this and of the preceding fibre, midway between the nuclei, was $\frac{1}{4750}$ of an inch.

timate fibrils. According to this view the cell membranes constitute the myolemma, and the contents of the cell are a blastema, out of which new cells are formed.

The disposition of these latter cells, in the production of fibrillæ, is probably much more simple than has hitherto been conceived. In the muscular fibre of organic life, the process would seem to stop short of the formation of fibrillæ, the cells being accumulated without apparent order. The corpuscles, observed by Mr. Bowman, in fetal muscle (fig. 98), and the nodosities of organic fibre, are obviously undeveloped cells and nuclei.

Muscles are divided into two great classes, voluntary and involuntary, to which may be added, as an intermediate and connecting link, the muscle of the vascular system, the heart.

The *voluntary* or *system of animal life*, is developed from the external or *serous* layer of the germinal membrane, and comprehends the whole of the muscles of the limbs and of the trunk. The *involuntary*, or *organic system*, is developed from the internal or *mucous* layer, and constitutes the thin muscular structure of the intestinal canal bladder, and internal organs of generation. At the commencement of the alimentary canal in the œsophagus, and near its termination in the rectum, the muscular coat is formed by a blending of the fibres of both classes. The heart is developed from the middle, or vascular layer of the germinal membrane; and although involuntary in its action, is composed of ultimate fibres, having the transverse striæ of the muscle of animal life.

Structure of Serous Membrane.—Serous membrane consists of two layers, an external or fibro-cellular layer, and an internal layer or epithelium.

Structure of Mucous Membrane.—This membrane is analogous to the cutaneous covering of the exterior of the body, and resembles that tissue very closely in its structure. It is composed of three layers, an *epithelium*, a *proper mucous*, and a *fibrous layer*.

Structure of the Intestinal Canal.—The pharynx has three coats; a mucous coat, a fibrous coat derived from the pharyngeal fascia, and a muscular layer.

The œsophagus has but two coats, the mucous and muscular. The stomach and intestines have three, *mucous* and *muscular*, and an external *serous* investment, derived from the peritoneum.

Synovial Membrane, is a thin membranous layer, which invests the articular cartilages of the bones, and is thence reflected upon the surfaces of the ligaments which surround and enter into the composition of a joint. It resembles the serous membranes in being a shut sac, and secretes a transparent and viscous fluid, which is named synovia. Synovia is an *alkaline* secretion, containing albumen, which is coagulable at a boiling temperature. Besides the synovial membranes entering into the composition of joints, there are numerous smaller sacs of a similar kind interposed between surfaces which move upon each other so as to cause friction; they are often associated with the articulations. These are the *bursæ mucoe*; they are shut sacs, analogous in structure to synovial membranes, and secreting a similar synovial fluid.

Fibrous Tissue is one of the most generally distributed of all the animal tissues; it is composed of *fibres* of extreme minuteness, and presents itself under three elementary forms; namely, white fibrous tissue, yellow fibrous tissue, and red fibrous tissue.

In *white fibrous tissue* the fibres are cylindrical, exceedingly minute, (about $\frac{1}{15000}$ of an inch in diameter), transparent and undulating; they are collected into small fasciculi (from $\frac{1}{3000}$ to $\frac{1}{10000}$ of an inch), and these latter form larger fasciculi, which according to their arrangement give rise to the production of thin laminæ, membranes, ligamentous bands and tendinous cords.

The *membranous form* of white fibrous tissue is seen in the common connecting medium of the body, namely, fibro-cellular or areolar tissue, in which the membrane is extremely thin and disposed in laminæ, bands, or threads, leaving interstices of various size between them. It is seen also in the condensed covering of various organs, as the periosteum, perichon-

drium, capsulæ propriæ of glands, membranes of the brain, sclerotic coat of the eyeball, pericardium, *fasciæ*; *sheaths of muscles*, tendons, vessels, nerves, and ducts; sheaths of the erectile organs, and the corium of the dermic and *mucous* membrane.

Yellow fibrous tissue is known also by the appellation *elastic tissue*, from one of its more prominent physical properties, a property which permits of its fibres being drawn out to double their length and again returning to their original dimensions.

Red fibrous tissue is also termed *contractile tissue*, from a peculiar property which it possesses, and which places it physiologically in an intermediate position between white fibrous tissue and muscular fibre.—*Wilson's Anatomy*.

Poisoning.

Animal carbon, or animal charcoal purified, is an antidote to all *vegetable* and *animal* and some *mineral* poisons, as arsenic, and so is calcined magnesia, which besides arsenic, decomposes morphia, strychnia, emetic tartar, sulphate, and acetate of copper and corrosive sublimate, &c. In cases of poisoning with homœopathic medicine, these antidotes should be used alternately in the same kind of doses. In cases of poisoning by large aleopathic doses of medicine, these antidotes should be alternated, and given in large doses, or from a teaspoonful to a tablespoonful each, and repeated once or twice in the course of twenty-four hours, or oftener, if circumstances should require it.

When such patients are found in a profound sleep from poisoning by laudanum or other narcotics, or are disposed to sleep, or have become very feeble or much exhausted by the action of any other poison, their stomachs and muscles should be magnetised. The stomach should be magnetised in the manner described in tubercula of the stomach, page 52, and the muscles as directed in page 57.

In cases of poisoning by very large doses of opium, laudanum, arsenic, corrosive sublimate, &c., the sulphate of zinc should be given immediately, which will vomit the patient in an instant, and clear the stomach, when the carbon and magnesia should be given as above described, or the stomach pump may be used to clear the stomach, if there should be objections to the use of the zinc

SIGNS USED IN PRESCRIPTIONS

- ℔**—*libra*, a pound.
 $\frac{1}{2}$ —*uncia*, an ounce.
 $\frac{1}{3}$ —*drachma*, a drachm.
 \oslash —*scrupulum*, a scruple.
gr—*granum*, a grain.
M—*minimum*, 60th part of a fluid drachm.
R—stands for *Recipe*.
ā, *āā* or *ana*—of each alike.
Coch—*cochleare*, a spoonful.
P. Æ.—equal quantities.
ss.—half of any thing.
iss.—one and a half of anything.
q. s.—a sufficient quantity.
q. pl.—as much as you please.
O.—*octarius*, a pint.
j.—one of anything.
ij.—two of anything.
iiij.—three of anything.
iv.—four of anything.
x.—ten of anything.
xij.—twelve of anything.
f., prefixed to *dr.* or *oz.*—fluid ounce.
gtt.—*gutta*, a drop.
 $\frac{1}{4}$ *iv.*—equal to a cup-ful.
 $\frac{1}{3}$ *iss* to $\frac{1}{3}$ *ij.*—a wineglass-ful
f. $\frac{1}{3}$ *ss.*—a table-spoonful.
f. $\frac{1}{3}$ *iiij.*—a dessert-spoonful.
f. $\frac{1}{3}$ *j.*—a tea-spoonful.
Pugillas—as much as can be held between the
thumb and finger.

MISCELLANEOUS RECIPES.

CHRONIC BRONCHITIS—Cough and expectoration, but no pain produced by pressure on the intervertebral spaces between the last cervical (7th) and first dorsal vertebræ.

℞. Hard Bal. Copa. and Cubebs, 3 iiss. Ext. Hyos. 3 ss. Make 100 pills. Dose, 1 pill three times a-day—after eating.—*Specific*.

COUGH—*Troublesome at night*.—℞. Solu. Morphine, 3j. Syr. Bal. Tolu. 2 oz. Mix. Dose, a tea-spoonful, at night on going to bed.

HAWKING—*with expectoration*.—Tubercular disease of the throat.

℞. Mag. gold pills, and mag. machine.—*Specific*.

HOOPING-COUGH.—℞. Cochineal pulv. 10 grs. Salts Tartar 30 grs. Sugar 1 oz. Hot water, half a pint. Mix. Dose, a tea-spoonful three times a-day.—*Specific*.

PURPURA HEMORRHAGICA.—Purple spots in the skin, and bleeding from the gums, &c.

℞. Creosote, half a minim (drop). Alcohol, a sufficient quantity to suspend it in an ounce and a half of mucilage. To be taken every six hours.

In cases where the gums are bleeding, the following may be used frequently as a gargle :

℞. Creosote, 30 drops. Alcohol, a sufficient quantity to unite it with twelve ounces of water.

ULCERATED EARS.—℞. Jamaica Spirits, a wine-glass-ful. Honey, a tea-spoonful. Mix, and introduce a little into the ulcerated ear morning and evening, with a feather.—*Dr. Van Buren*.—*Specific*.

ASTHMA.—℞. Magnetic machine, and Hyos. Magnetize as directed in Bronchitis.—*Specific.*

BRUISES, BURNS, SCALDS.—℞. Tinct. Arnica, 10 dr Warm water, a table-spoonful. Mix, and wet the bruise, burn, or scald, with the solution.

RHEUMATISM—*Cold sensations, cold streaks.*—℞. Tinct. Phos. 1 drop. in a wine-glass of water. The nitrate of potash (saltpetre) is, in many cases of this disease, far superior to the hydriodate or iodide of potash.—See prescriptions for rheumatism, page 110.

Colchicum.—The alcoholic tincture of *sem. colchicum* is the article to which we have referred, and which should be preferred, as discordant results are the consequence of the use of other preparations of this medicine.

Antimony, Phosphate. Pulvis Antimonialis (James' Powder).—This medicine is magnetized as it comes from the shops, as is also Dover's Powder; and the power and value of both are greatly increased by triturating them an hour in a ground-glass mortar.

CHOLERA MORBUS.—℞. Salts Tartar, Pearl-ash, or Saleratus, 1 tea-spoonful. Water, 1 pint. Dose, a large table-spoonful. Opium, 1 grain, or 30 drops of the tincture, for an adult. The alkaline solution and the opium to be taken *every* time the patient vomits, and *every* time he has a motion of the bowels.—*Specific.*

In **CHOLERA INFANTUM**, or the Cholera of Infants, there is nothing to be compared to these alkalies and tincture of opium, which should be given in doses proportioned to the age and condition of these patients.* These remedies are also among the most important in **ASIATIC CHOLERA.**

* Among the Homœopathic remedies for this disease, causticum and opium are the best, and correspond with these; and are very useful in the diarrhœas and dysenteries, or summer complaints of little children. See pages 86, 87.

RETCHING AND VOMITING IN PREGNANCY.—℞. Mesmerize a small bag of peppermint; place it over the stomach, and fasten it there with a string around the body.—*Clairvoyant*.

HOOPING-COUGH.—℞. Causticum, 3 to 5 globules, with 1 to 3 globules of cochineal, given from one to three times a-day, in a wine-glass of water.—*Homœopathic*.

Magnetized Gold Pill.—A magnetized chemical compound of gold, iodine, and chlorine; an intricate and difficult preparation, and of specific and extraordinary power.

STERILITY is one of the consequences of chronic serosis, or tubercular disease of the uterus, for which the magnetized gold pill is the specific, as is well known to many physicians.

TEMPERAMENT.—Magnetizing, like mesmerizing, produces a change of temperament. Persons who were very insusceptible to mesmeric influence, have become very susceptible to it, from the use of the magnetic machine.

COUGH IN CONSUMPTION, OR IN CHRONIC BRONCHITIS. ℞. Tar (hard wood the best) one table-spoonful, Jamaica spirits half a pint, honey half a pound. Mix and shake well, or one hundred times. Dose: a tea-spoonful once, twice, or three times a day.—*Clairvoyant*.

NAUSEA, or Sickness of the Stomach.—℞. Tinct. Ipecac. 3 to 5 drops, in a wine-glass of water; or of first dilution 5 to 10 drops, in a wine-glass of water.—*Homœopathic*.

ACIDITY OF THE STOMACH.—℞. Salts Tartar, Salæ-ratus, or Pearl-ash, 1 tea-spoonful. Water, 1 pint. Dose, a quantity sufficient to neutralize the acidity.

ACIDITY OF THE STOMACH.—℞. Causticum, 1 to drops, or 5 to 10 globules, in a wine-glass of water.—*Homœopathic.*

QUACKS AND NOSTRUMS.—℞. Educate physicians in a scientific manner, to enable them to distinguish and cure chronic diseases.—*Clairvoyant.*

IMBECILITY OF MEDICAL COLLEGES.—℞. Replace the professors of the crude notions of a by-gone age, with the talented young men of the profession.—*Clairvoyant.*

Magnetized Rings.—These rings should be made of steel wire, *plated* with gold, silver, tin, copper, or brass. When finished, they should be magnetized, one at a time, by placing a ring flat on one of the poles of a strong magnet, and then pressing on, and at the same time drawing it entirely off of the magnet with a quick motion. The ring will then have two poles, which will affect the compass or variation-needle; one of which should be worn on a finger of the right, and another of the left hand.

Gold rings made in this manner have a real value, as their influence on children and adults affected with *tubercula*, and at the same time very susceptible to magnetic or mesmeric influence, is very salutary, as shown by a trial of their effects in a great number and variety of cases during the last three years, and they will last a life-time. They have, however, *little or no effect* upon those who are insusceptible to these influences.

These rings are manufactured by J. & R. ELKINS, Jewellers, 60, Reade Street, near Broadway.

Acetate of Iron.—To 1 quart of vinegar add 1 doz. large iron nails, and leave it in an open bottle one week, and then add an equal quantity of rain water, when it will be fit for use.

ALLOPATHY,

OR OLD PRACTICE OF MEDICINE.

A SYNOPSIS,

Containing a short abstract of the most practical articles; and showing at a glance, the most important indications of treatment by different writers, published within the last year, 1846.

Disorders Affecting the System generally.

FEVERS.

Typhus.—The great indication of treatment is to produce fibrine, i. e., to separate the nucleus (the true representative of fibrine), from the envelope of each blood corpuscle. By giving chlorine (muriatic acid) and ammonia alternately, this is accomplished. The envelope is decomposed, the nucleus remains undissolved. (Dr. Richter. p. 32.)

Dilute the system with nitrogenized matters, from the fact of ammonia or nitrogen being deficient in the system in typhus. After giving a full dose of castor oil, give 10 grains of carbonate of ammonia every six hours until the return of cerebral action, and then give aperients and quinine. Good beef tea well seasoned with spices and salt. Plenty of water and diluents. Port wine when the pulse will bear it. (Mr. Grantham. p. 29.)

When the circulation requires it, give wine under all circumstances of derangement of the functions. Two drachms of ether in the form of injections every two hours, when swallowing is difficult. Blisters in succession over the surface, every six hours, over chest, abdomen, thighs, and legs, as stimulants to excite the capillary system. (Dr. Corrigan, p. 30.)

Ague.—Large doses of quinine (from 10 to 60 grains a day), for four successive days, and intermitting it the six following days, thus embracing the interval comprehended in three fits; or,

A large dose of quinine as soon as a fit threatens or takes place, and then omitted till another paroxysm comes on. Doses from 15 to 30 grains each day, increased sometimes to 60 grains. (Dr. Graves, p. 25.)

Before giving quinine, relieve congestions of internal organs, which may occur even in anæmic subjects; and then give a large dose of quinine, followed by small doses, in order to keep up its stimulating or tonic effects on the capillaries. (Dr. R. Chambers, p. 26.)

Every sufficient dose of quinine or bark loses power by fractioning it, like a dose of wine; therefore give a large or full dose during or just after a fit, and also during the intermission: the second dose to be given on any day from the first to the sixth interval, then to be repeated after intervals of 7, 8, 9, 10, 12, 14, 16, 18, 22, and 30 days. Best time for the dose immediately after a light dinner, and the first dose just after an attack. A dose from 15 to 20 grains of sulphate of quinine, or 3 or 4 drachms of cinchona will keep off the fit for about eight days. (Bretonneau, p. 28.)

Scarlatina.—As soon as the efflorescence appears, and when the fauces are red, apply a solution of nitrate of silver to the inflamed parts in the throat (10 grains to the ounce); apply the camphor liniment combined with laudanum externally; and to a child of three years old, give half a drachm of diluted distilled vinegar, in syrup and water, every three hours; after fifteen years, give two drachms to a dose. The solution of nitrate of silver should be applied once or twice a day, by means of a bit of sponge at the end of a lead pencil. (Mr. Brown, p. 35.)

When there is dropsy, with albuminous urine after scarlatina, the epithelium separates from the mucous surface of the kidney, and there is a desquamation similar to that on the skin. Cutaneous action should be kept up until the renal secretion is restored, or all the consequences of Bright's disease may occur, and the patient die from the retention of urea in the

system. It is in the mild forms that dangerous sequelæ are to be apprehended, the poison having been imperfectly, or not at all, eliminated through the skin. (Dr. Todd, p. 124.)

CANCER.—Use methodic compression, as recommended by Mr. Young. Apply perfectly smooth disks of agaric, laid over each other, and retained *in situ* by a roller (Rccamier). Use a laminated plate of lead, modelled to the tumor, surmounted by graduated compresses. (M. Begin.) Dr. Arnott's plan of applying pressure by means of an air cushion and spring, is the best, as it makes equal and regular pressure on the tumor, and is applicable whenever a bony or other solid support exists behind the growth, where a point for counter-pressure can be had. (p. 168.) Give the following internally: ℞. Arsenici iodureti, gr. j.; ext. conii, ℥ij.; in pil. xvi.; dividend. j. bis dies. Diet should be light and nutritious, and exercise moderate. (Dr. Walshe, p. 169.)

SEROFULA.—Give muriate of barytes in doses of from half a grain to three grains. When given to infants, add a syrup to diminish its irritant effects, and if there be spasm, combine it with some aromatic or antispasmodic. The following is a good formula: Muriate of barytes, muriate of iron, of each half a drachm; water distilled, syrup of orange peel, of each half an ounce. Or give half a grain of barytes in a tea-cupful of infusion of hop, or some bitter infusion, every morning fasting, gradually increasing the dose. Or give it in pill, the best way, in doses of one-twelfth of a grain three times a day, increasing the frequency of the doses, rather than the quantity in each. Barytes does not supersede iodine in these cases, but sometimes iodine does no good, or it does good only to a certain point, and then proves noxious; it is here that barytes is of the greatest service.—Dr. Walshe. p. 170.

Scrofulous Tumors.—Consecutive to inflammation and suppuration of the lymphatic glands, apply the following ointment:—Oil of cod livers, 15 parts; liq.

of subacetat. of lead, 8 parts; yolk of egg, 12 parts : make into a homogeneous ointment.

Scrofulous Ophthalmia.—Smear the margins of the eye-lids with cod liver oil. twice or thrice a day, by means of a camel-hair brush, or feather.—Dr. Bre-feld, p. 171.

RHEUMATISM.—Give colchicum, but should the fever run very high, add bleeding and mercurial purgatives; if the pain be of a nervous character, give opium or morphia. The colchicum acts by eliminating morbid matter from the system. The urine becomes increased in quantity, or specific gravity, or both; there may be a sediment, or this may be eliminated as dissolved urea, and then there is no deposit. Continue the colchicum for a week or ten days after the pain has subsided, to get rid of rheumatic matter; combine it with a mild tonic, iodide of potassium, and a good diet.—Dr. Williams, p. 165.

Acute.—Give one or two grains of opium every second or third hour, or ten, twelve, or more grains in the twenty-four hours. The opium is to be increased in dose, both as to frequency and quantity, until there is decided relief, and kept at that dose until the complaint is steadily subsiding.—Corrigan.

Bleed, once or twice, in the robust only, and give gr. v. to gr. x. of calomel, with gr. iss. or gr. ij. of opium, every night, and a purgative next morning. Give also the following draught, three times a day : —vin. colchici, mx. ad. xx.; pulv. ipecac. co.; gr. v.; mist. salin. 3x.; syrupi, 3j.; M. Between the second and fourth day, and sooner, if tenderness of the gum occurs, omit the calomel, and continue one grain of opium at bedtime, and in some cases at noon, as also the colchicum draught, and morning senna purge. [Dr. Hope.] When sore mouth supervenes, instead of continuing the opium, if there be not much pain left, give quinine and iodide of potassium. Disease of the heart is rare under either Dr. Corrigan's or Dr. Hope's plan of treatment; if it does occur, give large and repeated doses of calomel and opium. If

the disease becomes chronic, or the attendant fever is of a hectic character, give quinine or hydriodate of potash, in full doses.—Dr. Griffin, p. 162.

Chronic.—Give the clear cod-liver oil, in doses of a tea-spoonful, and gradually augment the dose to a wine-glass full, night and morning. Do not give this oil where dyspeptic symptoms co-exist. The best vehicle is a thin infusion of linseed, flavored with lemon-peel, and sweetened to please the palate.—Dr. Bradshaw, p. 163.

Muscular.—"Fire" the parts with the instrument used by Dr. Corrigan. [See Paralysis, p. 56.]

Gouty Neuralgia.—This affection, often called sciatic gout from its seat, is cured by an attack of regular gout. Give a mild mercurial course, with salines, especially alkaline diuretics; occasional moderate detraction of blood, either generally or locally; a light and lowly animalized diet; and a most rigid abstinence from all fermented liquors, especially porter and aleo. The clothing should be warm; and give colchicum.—Dr. Robertson.

In gouty inflammation, apply leeches, and keep up a gentle oozing from the bites by warm fomentations; then keep the part covered and apply a lotion made of one part of spirit, three of camphor mixture, and a little vinegar. Give colchicum to stimulate and increase the secretion of the mucous membrane of the bowels, and to eliminate lithic acid and other nitrogenized elements from the system.—Med. Chir. Reviewer, p. 162.

Rheumatic Gout.—Mix phosphate of ammonia, say ℥ss., in ℥vi. of distilled water; and give half an ounce of this either combined with small doses of musk or not. It decomposes the insoluble lithate of soda supposed to exist in the blood, and forms two new soluble compounds, phosphate of soda and lithate of ammonia. Give it for a considerable time where thickening of the white tissues exists; it deprives the blood of the lithic acid and soda, and creates a demand for them, which leads to absorption of these elements from the tissues where they have been deposited. This remedy is not intended to supersede the use of the lancet, and other remedies in acute rheumatism.—Dr. Buckler, p. 154.

Affections of the Nervous System.

TETANUS.

Traumatic.—Give large doses of tincture of aconite, prepared according to Dr. Fleming's formula. Watch the case very attentively. Dr. Fleming would not exceed a second dose of 5 minims 2 hours after the first. In traumatic tetanus this will not be sufficient. Give 18 or 19 minims in eight hours; the second day increase the dose to 32 minims in fourteen hours; third day, 25 minims in seven hours; and fourth day, 20 minims in two hours. Watch these doses unceasingly, and diminish them according to circumstances.—Mr. Page, p. 60.

Idiopathic.—Do not depend so much on stimulants, but support the strength on nutritious diet, such as animal jellies. Give opium in large doses with hydrocyanic acid; also a well-sustained course of purgatives, as colocynth pills with castor oil; cupping over the spine; turpentine glysters.—Dr. Watson, p. 57.

Try the hydropathic method of treatment. Envelope the patient in a cold wet sheet; over this place three or four good blankets; keep the patient in this condition for an hour, by which time the temperature of the sheet will probably be 100°. Then remove the coverings, and plunge the patient into a cold bath; rub him quite dry, and envelope him again in blankets for six hours. Repeat this operation if the symptoms do not abate.—Mr. Preshaw, p. 60.

HYDROPHOBIA.—Employ large doses of the tincture of aconite, as recommended in traumatic tetanus.—[See Tetanus, Traumatic.]

DELIRIUM TREMENS.—Give opium and emetic tartar. Antim. potass. tart. gr. iv.; tinctura opii. ʒj.; mist camphoræ, ʒviij. Mix, and give two table-spoonfuls for first dose, and one every half hour afterward, until delirium abates or drowsiness comes on.—Dr. Graves, p. 96.

When morphia and other narcotics fail, and the case is extreme, blister the back between the scapulae, peel off the cuticle to the extent of three inches by two, and cover the part over with a layer of pure extract of belladonna. Within ten minutes there may be twitchings of the facial muscles, intoxication, pupils dilated, and drowsiness; immediately remove the belladonna, or even sooner.—Mr. Flood, p. 39.

Asthenic Form.—The object is to support the strength and allay irritation. Give stimulants and opium. The attack has come on gradually, and the patient has lived on stimulants, without proper food; the system is impoverished. Give broth and nutritious diet, with moderate quantities of good wine, and full doses of opium.

Sthenic Form.—The patient has been intemperate for a short time only, during an election, &c.; he is otherwise robust; the case borders on inflammation. Do not give opium: apply leeches to the epigastrium or head; cold lotions. Do not commence by stimulating, nor by giving narcotics; although one or both of these methods may be ultimately required.—Dr. Corrigan, p. 41.

MANIA (Mental Excitement).—In cases with great action or excitement without power, the great object is to subdue the cerebral excitement by procuring sleep. For this reason give occasionally tinct. hyosciam. mxxx.; tinct. humuli, ʒij.; camphor, gr. v. to x. Or, relieve visceral congestion by leeches to the rectum; or give a full dose of opium. In anæmic cases, it is often necessary to give a stimulant, or good nutritious food before a narcotic. A combination of opium and tartar emetic; or calomel and opium; or the infusion of opium with a bitter; or the hydrochlorate of morphia; or an opiate enema may be tried. Rub three or four tea-spoonfuls of laudanum over the stomach; or rub the shaved head with liniment, camph. fort. combined with opium.

Apply a blister to the back, peel off a small portion of the cuticle, and apply the pure extract of belladonna for nine or ten minutes. [See Delirium Tre-

mens.] When mania is periodic, give arsenic, tinct. ferri sesquichlor., zinc, copper, or tonics. Arsenic seems to alter the sensibility of the brain. It is, perhaps, better to keep the head regularly cold, than to apply the douche.—Dr. J. Williams. p. 35.

Puerperal.—Give opium and tartar emetic, as recommended in the treatment of delirium tremens.—Dr. Graves, p. 96.

PARALYSIS.—In cases where there is no organic lesion in the central organs, “fire” the patient every day, if permissible, along the spine, thighs, and legs, or other parts. Mode of application.—“The iron consists of a thick iron wire shank, two inches long, inserted in a small wooden handle, having on its extremity, which is slightly curved, a disc or button of iron, a quarter of an inch thick, and half an inch in diameter. The face of the disc is flat, not spherical, like the French ones. Hold the button over the flame of a small spirit lamp, keeping the fore-finger about half an inch from the heated button. As soon as the finger feels uncomfortably hot, withdraw the button, and apply it as quickly and lightly as possible, at intervals of half an inch over the whole of the affected part, bringing the flat surface of the disc fairly in contact with the skin. A whole limb or the back may thus be fired in a hundred places, if necessary, in one minute. By looking sideways at the spots, the skin should look first of a glistening white, and, in a short time, of a bright red.—Dr. Corrigan. p. 55.

When there is no organic lesion, but only a want of nervous energy, in cases of local and not general paralysis, as when a single muscle of a certain class of muscles are affected, as by the action of lead, make use of magnetic electricity.—Dr. Neligan, p. 43.

In cases depending upon cold, poisons, molecular changes in the brain and nerves, give strychnine in doses from one-eighth to a quarter of a grain three times a day, and cease on the appearance of poisonous effects.—Dr. Favell, p. 55.

EPILEPSY.—One great difference between epilepsy

and apoplexy is, that in the former the respiratory movements are even more active, impeded, indeed, by the spasm of the glottis which often exists, whereas in apoplexy respiration is impaired; hence the coma of apoplexy is more dangerous; not so with epilepsy, in which respiration is even exalted. This may be owing to the circulation through the cerebrum being impeded, and by means of the circle of Willis, diverted to the medulla oblongata; hence the exaltation of the medullary functions in hysteria, epilepsy, &c. Hence also the greater liability to convulsions during sleep, the superior hypnotic influence of moderate doses of opium, which exalt the medullary while they impair the cerebral functions, and the wakefulness caused by prussic acid, which impairs the medullary functions.—The great object of treatment is to equalize the circulation; not to allow one part to monopolize the blood at the expense of another. Bleeding is very exceptionable, as the cases often occur in anæmic subjects. Improve the vigor of the circulation, and even increase the quantity of blood. Apply cold to the head and spine, and heat to other parts; purge, give diuretics, counter-irritate. Advise regular exercise, warm clothing. Subdue the action of the heart by hydrocyanic acid, digitalis, henbane, valerian. Improve the general tone of the system; give nitrate of silver, zinc, copper, chalybeates, mineral acids, bark, quinine. Perhaps the best is the muriated tincture of iron.—Dr. C. J. B. Williams, p. 49.

APOPLEXY.—When caused by intravascular congestion, plethora, or hyperæmia, deplete: when caused by extravascular effusion, the system is under the influence of shock, and does not bear depletion well.—How shall we know the latter case? Vertigo is a good characteristic, coming on in the act of stooping, sudden change of position, &c. But the best plan is to feel our way by a small blood-letting, and watch the effect. When caused by hyperæmia or inanition, restore the equilibrium of the circulation by good diet, and improving the health; quinine, iron. In

this case the relief from depletion is transitory.—Dr. M. Hall, p. 46.

Neuralgia.—"Fire" the parts affected, and do it repeatedly, if necessary.—Dr. Corrigan, p. 55: see Paralysis.

Give three grains of sulphate of quinine, with one-eighth of a grain of sulphate of morphia, an hour before each expected attack, and then give five drops of tincture of Indian hemp three times a day, and rub some cajeput oil on the part affected. Continue the quinine three times a day, and increase the Indian hemp to seven and ten drops three times a day till relieved.—Mr. Hargrave, p. 66.

Give colchicum, either alone or combined with other remedies, especially in cardiac neuralgia; and in this case, apply the tobacco leaf externally over the seat of pain: it should be slightly moistened, and removed on any symptoms of giddiness or sinking appearing.—Dr. Fife, p. 67.

Make a liniment with one drachm of tincture of aconite of the shops, and seven drachms of fresh palm oil, or with two ounces of camphor liniment. Rub half a drachm or a drachm of the former, or double the quantity of the latter, into the part affected, twice or thrice a day, according to its effects. It must be watched attentively, as the medicine is cumulative. If its poisonous effects appear, give a stimulant, as wine, or get the patient into the fresh air.—Mr. Kirby, p. 65.

[See Retrospect, Part XII., Art. 9. for Dr. Fleming's interesting Paper on this medicine; and for his formula for the preparation of his tincture of anconite, see the same article, page 41.]

Facial. (Orbital.)—Give half a grain of valerianate of zinc every eight hours, combined with two grains of extract of hyosciamus. Follow this with gentle purgatives.—Dr. Bell, p. 62.

Periodic.—Give large doses of sulphate of quinine, from a scruple to half a drachm daily. Combine it, if necessary, with Fowler's solution of arsenic; but omit the arsenic unless unsuccessful with quinine and other remedies.—Sir B. Brodie, p. 62.

When the sulphate of quinine fails, give the tannate

of quinine in the same doses as the sulphate.—Dr. Hauff, p. 65.

SCIATICA.—Apply a blister to the hip, peel off the cuticle and dress the part twice a day with one grain of hydrochlorate of morphia. Repeat the blister and morphia when necessary. Give also, three times a day, two ounces of guaiacum mixture, with 40 minims, or one drachm of the tincture of guaiacum; and apply some stimulating liniment. If these fail, try the internal use of turpentine.—Dr. Taylor, p. 61.

“Fire” the parts along the course of pain, and also, if necessary, across the loins.—Do it repeatedly, if requisite.—Dr. Corrigan, p. 55: see Paralysis.

Affections of the Circulatory System.

ANÆMIA.—Improve the general health and strength, and the quantity and quality of the blood. Iron forms the chief part of the hæmatosin which is contained within the external envelope of the red globules; therefore, this is one of the most important medicines by which to increase the quantity of the globules. It is better to give iron in small quantities for a long time, than in large doses for a short time. The first organ to be attended to will often be the stomach and digestive organs. If the stomach will bear it, begin with mist. ferri. co. or with tinct. ferri. sesquichlor. in a bitter infusion: or give the sulphate of iron combined with ext. gent. or with ext. hyosciam, and a little aloes or rhubarb. When there is œdema, combine the potassio tartrate of iron, with bitartrate of potass. The iodide of iron is also an excellent preparation. Sometimes iron cannot be borne at first: in this case give the bitter infusions, or, if the stomach be irritable and neuralgic, give hydrocyanic acid, with a little muriate of morphia, or the oxide of silver: in this case a belladonna plaster over the stomach, and even one third of a grain of extract of belladonna, three times a day, may be tried. It is impossible to anticipate all the symptoms which appear in anæmia: the case must be treated accordingly. (Dr. Turnbull, p. 69.)

HEART.—(*Functional Diseases.*)—Palpitation.—Owing, 1st, to a distended stomach; and thus inter

fering with the descent of the diaphragm, and confining the heart's motions : 2d, a distended colon pressing on the aorta, causing fullness of blood on the left side of the heart : 3d, a distended stomach and colon pressing on the ascending cava, and causing a deficiency of blood on the right side of the heart : 4th, hepatic disease. Each of these states will require its particular treatment. (Dr. Bellingham, p. 77.)

ANEURISM.—Compression in the treatment of.—Such an amount of compression is not necessary as to cause inflammation and adhesion of the opposed surfaces of the vessel, nor should the circulation in the artery at the point where it is compressed be entirely intercepted. To apply it successfully, the velocity of the current should be diminished, and the amount of blood in the sac be diminished, so as to encourage the deposition of fibrine, until the sac is quite filled. It has this advantage over the cure of aneurism by ligature, that the artery is obliterated at the seat of the aneurism, by which the chances of gangrene are diminished. The cure is also more effectual as the sac and also the artery leading from it, become *filled* with fibrine, whereas, after ligature, a loose coagulum remains which does not fill the sac. (Dr. Bellingham, p. 209.)

It is not unfrequently found that the artery and its accompanying vein have become adherent, which is a great source of embarrassment to the operator when tying the artery ; this is avoided by adopting the treatment by *compression*. A moderate degree of pressure is all that is necessary throughout, so as not entirely to intercept the current of blood through the vessel. (Dr. Porter, p. 211.)

ANEURISM by Anastomosis or Nævus Maternus.—Tie the tributary arteries in the neighborhood. (Palletan. Wadroe. Dr. McLauchlan.) Tie the arteries supplying the tumor, and then remove it by knife, securing the bleeding vessels with ligatures. (Syme.) Cut off the supply of blood to the tumor by making incisions around it, secure the bleeding vessels, and place pledgets of lint between the cut surfaces to prevent union taking place. (Dr. Gibson.)

Use galvano-puncture for ten minutes at a time, with 15 pairs of plates. The pins introduced into the tumor should be numerous, and cross each other at right angles; apply ice after the operation. Dr. Petrequin.)

NÆVI.—Apply lint steeped in liq. plumbi, or solution of alum, and strap it over the part with a bandage; wet the lint without removing it, and keep it so applied for several weeks. Should this fail cut out the tumor, if no larger than a crown piece, and close the edges of the wound by twisted suture. (p. 231.)

SUBCLAVIAN ARTERY.—(*Ligature of.*)—When there is extensive swelling and suppuration, after the lesion of an artery, it is not advisable to cut down upon it, to tie it at the seat of injury; and when this is the case after the wound of the subclavian, it is better to secure the artery beneath the scalenus, before it approaches the tubercle of the rib; it is much higher and more accessible there. (Dr. Warren, p. 222.)

POSTERIOR TIBIAL ARTERY.—(*Wound and ligature of.*)—Take the wound as a centre, and cut down upon the vessel, and tie it both above and below the seat of injury. (Arnott.) If it be a case of secondary hæmorrhage, and there is a good deal of coagulum in the parts surrounding the vessel, it will be advisable to tie the femoral artery. When there is a wound in the calf of the leg, with sufficient bleeding to warrant a belief that the posterior tibial artery is wounded, separate the soleus from its attachment to the tibia, cutting through the deep fascia, and secure the vessel. (Mr. B. B. Cooper, p. 217.)

HÆMORRHAGIC DIATHESIS.—Apply to the bleeding part pads soaked in acetate of lead mixture, and cover it also with pulverized matico. Give the following mixture: R. Plumbi super acet. ʒss. acid acet. dil. ʒss. syr. rhœad. ʒss.; aquæ ʒv. M. sumat. cochl. ij. magn. omn. tertia hora. If the acetate of lead begins to affect the system, substitute for it the sulphate of soda. You must rely on constitutional treatment. (Dr. Clay, p. 234.)

EPISTAXIS.—Give the oxide of silver internally. (Mr. B. Lane, p. 103.)

Affections of the Respiratory System.

BRONCHITIS.—(In Infants.)—If very severe make use of the warm bath, and give one grain of calomel and two of ipecacuanha with a little compound tragacanth powder, every four hours; if less severe, three times a day, and lengthen the period as improvement takes place. After the first or second dose, the ipecacuanha does not act as an emetic. When necessary to apply a blister to an infant, place a piece of tissue paper between it and the skin, or dip a piece of blotting paper into acetum cantharidis; apply it to the part, and in ten or fifteen minutes you will have a blister. (Mr. Miller, p. 88.)

Chronic or Subacute.—Cause the patient to inhale the fumes of ammonia. (p. 90.)

PNEUMONIA.—(Chronic.)—Cause the patient to inhale the fumes of ammonia, in order to stimulate the parts. (p. 89.)

ASTHMA.—Dip a charpie-pencil into pure liquid ammonia and then into water, and apply it to the velum, uvula, and upper part of the œsophagus. Do not let it remain too long in contact with the soft parts, nor carry it too deeply into the throat; where there is emphysema, one application will be sufficient. The absorption of ammonia by the stomach will probably produce the same result, if given in sufficiently large doses, or its inhalation when diffused in the atmospheric air.—(M. Guerard, p. 89.)

APHONIA.—Loss of Voice.)—Inhalation of fumes of pure ammonia. (p. 90.)

ASPHYXIA.—Use cold affusion, and when respiration is fully established, open a vein. (Mr. Noyce, p. 288.) Cause the patient to inhale the fumes of pure ammonia. (p. 89.)

ŒDEMA.—(Of the Glottis.)—When suffocation threatens, perform the operation of laryngotomy. (Mr. Drookes, p. 38.)

TRACHEOTOMY.—In children: lay hold of the trachea with a hook, and, having drawn it forwards, cut out a portion with a pair of scissors; or use Mr. Millikin's instrument, by which you can both fix and hook the trachea, and then cut out a circular

portion from the cartilaginous rings. Mr. Read's improved instrument is a very good one; the cutting part forms a curve or obtuse angle with the handle. (Mr. Carmichael. p. 236.)

Perform the operation early. If you cannot avoid the thyroid veins, cut straight through them; the hæmorrhage ceases on the introduction of the canula. If the case be not very urgent, keep the edges of the wound apart by some instrument, for a short time before introducing the canula, in order to allow of false membranes being expelled. You may expedite this by dropping water into the bronchi, and sponging the trachea. If the canula become obstructed, remove it immediately and empty it, and when the canula is withdrawn, introduce the dilator. After the fourth or fifth day diminish the size of the canula, and by the thirtieth day, it may be dispensed with. Drop into the air passages, fifteen or twenty drops of a solution of nitrate of silver (gr. v. to 3j.), and cleanse the trachea with a sponge dipped in the same solution. (Trousseau, p. 237.)

PARACENTESIS THORACIS.—Do not allow air to be admitted through the canula if it can be avoided. It may re-ignite inflammation, or convert the adhesive into the suppurative inflammation. Unless the lung capable of free and full expansion, do not attempt draw off all the fluid: remove only so much as the expanding lung and the surrounding compressed organs are capable of replacing. Watch the opening carefully, especially during inspiration and coughing, and when the stream begins to fail turn the patient on his punctured side till there is an alternate flow and stoppage of the stream during inspiration, and expiration, then immediately withdraw the canula. Apply a flannel bandage with moderate firmness around the chest. *Precautions.*—1. Always introduce an exploring needle first, to know if the diagnosis be correct. 2. Do not puncture one side before it is presumed that the other is sound enough to carry on respiration. 3. Draw off the fluid slowly through as small a canula as the density of the fluid will admit. 4. Only draw off the fluid till the air

seems to threaten to be admitted. (Dr. Hughes p. 36.)

Affections of the Alimentary Canal.

HARE LIP.—(Operation for)—Make the incision from above downwards, nearly as far as the red margin of the lip, and stop before you have detached the cut piece; then direct the incision at a right angle towards the meridian line. Do the same on the opposite side, and then unite the two margins in their whole extent, except towards their free borders; the flaps formed by directing the incisions towards the median line are to be approximated. (Mr. Smith.) If the child be strong and healthy, and the fissure only affect the lip and not the bones, the operation should be performed a few days after birth. (Dubois.) When the features are enlarged, there is more ground to work upon, therefore defer it until the first set of teeth have appeared. (Liston, p. 239.)

FRÆNUM LINGUE.—(New Instrument for Dividing.)—This resembles a pair of scissors; its blades are perfectly blunt and curved, and do not close completely, thus leaving an interval for the reception of the frænum. (Dr. Beatty, p. 245.)

CLEFT PALATE AND STAPHYLOGRAPHY.—Dissect the soft tissues from each side of the fissure in the palate, to such an extent as to make a flap broad enough to join its fellow of the opposite side in the mesial line, and stitch the whole between the uvula and the and the anterior extremity. Re-union to a considerable extent takes place, and towards the inner margin of the bones, and also on the upper surface of the soft portion in the middle, there will be a cicatrix analogous to mucous membrane. (Warren.)

The soft velum ought to remain in a state of perfect repose, and for this purpose, the levator palati, the palato-pharyngeus, the palato-glossus muscles should be divided. This cuts off all motor influence in an outward upward, or downward direction. For this purpose use a knife with a blade like the point of a lancet, the cutting edge being about a quarter of an inch in extent, and

the flat surface being bent semi-circularly. Make an incision half an inch long on each side of the posterior nares, and divide the levator palati muscle on both sides, just above its attachments to the palate; then pare the edges of the fissure, and with a pair of long blunt-pointed scissors, divide the posterior pillar of the fauces, and, if it seems necessary, the anterior pillar too, the wound in each part being a quarter of an inch in extent: then introduce stitches by means of a curved needle set in a handle, the threads being tied so as to keep the cut edge of the fissure in exact contact. The first incision, that for the division of the levator palati, should be made midway between the hard palate and the posterior margin of the soft flag, just above the thickest and most prominent part of the margin of the cleft. You may commence cutting either at the end nearest you, as you stand behind the patient, or that furthest off, as may seem most convenient. For ligatures, those of stout silk, or flaxen thread, are the best; and it is of the greatest importance that a stitch be used close to the lower end of the uvula, as there is a great tendency to separation there. The after-treatment the same as after ordinary operations, except that the parts are to be kept at rest as much as possible, and nutriment to be given by means of enemata of gruel and soups. (Mr. Fergusson. p. 240.)

PALATE.—(Operations on.)—In cases of small holes in the soft or hard palate, pencil their borders several times a-day with a concentrated tincture of cantharides. Inflammation and granulation come on and close the opening. Large openings are to be closed by suture, after parting the edges; and leaden wire is said to be preferable to silk, for ligatures, as it keeps the edges close together, and does not cut through the textures.

When there is adhesion between the velum palati and posterior wall of the pharynx occasioning deafness, and stopping the communication between the nares and air-passages, the adhesion must be divided transversely, by means of a long scalpel, about half an inch below the adherent border of the velum. The edge must be fixed by a hook, and drawn from

the wall of the pharynx, then, with a lancet-formed knife, the surface of which is curved, directed upwards, the velum is to be loosened, and the separation completed by scissors, also curved upon their flat surface. The upper adhesions are to be destroyed by passing a blunt curved iron instrument, like a very small spatula, along the inferior nares. Next prepare a ligature with a small curved needle at each end; with one of the needles transfix the velum, a few lines from its edge, and bring it out at a high point on the anterior surface of the palate; the other needle must be used in the same manner, a short distance from the side of the other; and the edge of the velum must be brought about half an inch from the palate. All mechanical means for closing the fissured palate, are not only injurious but dangerous; but if the size of the cleft, or other circumstances, render an operation unadvisable, then it may be covered with a gold palate, fixed to the teeth. In cases of holes in the palate, the edges of which are so callous that an operation would be unsuccessful, the opening may be stopped by wearing a double piece of Indian rubber, without fear of its being enlarged. Two pieces of Indian rubber, the thickness of pasteboard, are cut about four or five times larger than the opening, and between them a small round piece, and they are to be transfixed by waxed thread; thus, one plate lies on the anterior, the other on the posterior side of the palate, and the small middle strip in the opening. The patient can apply it himself, and it should be taken out to be cleaned once a week. (Dieffenbach, p. 244.)

CYNANCHE.—Make free incisions, varying them in depth and extent according to the case, in the following manner: Take a long round-pointed scalpel, and having covered the blade with adhesive plaster to within three quarters of an inch of the point, firmly press down the root of the tongue with the index-finger of the left hand, and make one or more incisions in a direction upwards and outwards along the tonsil and velum to the base of the uvula. The throat to be gargled with warm water to encourage

the bleeding ; in other respects gargles are useless, since they cause motion in parts which ought to be kept at rest. [Dr. Makin, p. 91.]

BOWELS.—[Acute inflammation of.]—Where local or general depletion has been used, or where they cannot be resorted to, give two grains of opium, and then one-grain doses every two hours, until about 32 grains have been taken ; watch the state of the bladder, and open the bowels with mild purgatives, combined with henbane. If the enteritis be intense, deplete ; and should the system resist opium, give calomel, but substitute opium for it as soon as the symptoms give way. Do not give it in small doses, for then it checks the diarrhœa, but does not relieve the inflammation. If dysentery exists, combine it with ipecacuanha. [Dr. Griffin, p. 94.]

DYSPEPSIA.—When dependent on or complicated with hyperæmatic or sub-inflammatory condition of the mucous membrane, direct the use of herbaceous aliment, as grapes, apples, strawberries, pomegranates, &c. ; give them about an hour before breakfast, and in the intervals of meals. Should flatulence and fæcal accumulation arise, treat the former with soda and ginger, and the latter with a pill of aloes, capsicum, and quinine. (Dr. Dick, p. 96.) Or, give oxide of silver in half-grain doses twice a day, in conjunction with aperients and alteratives. In gastralgia, oxide of silver acts well as a sedative.

PYROSIS.—Give half-grain doses of oxide of silver in a pill twice a day ; where there is deep-seated pain, apply leeches to the epigastrium first. (Mr. Butler Lane, p. 107.)

CONSTIPATION.—Where there is no recognized stricture, strangulated hernia or abdominal tumors, make use of an oleaginous enema, to five pints of which add an ounce of sulphate of magnesia, and a tablespoonful of common salt. In giving the injection, let the patient lie on his right side, with the pelvis considerably elevated ; it should be administered slowly, so that the intestine may be filled before it is distended, and when it contracts may force away the feculent matter mechanically. Use

well-boiled oatmeal gruel with common salt and butter. (Dr. Hall, p. 97.)

When it arises from obstruction near the junction of the ileum with the cæcum, inject air into the bowels. (Dr. Todd, p. 103.)

When dependent on indolence of the bowels, warm water injections are injurious. Give a pill containing one-fifth of a grain of the extract of nuxvomica every morning; it acts by rousing the contractile power of the intestine. It is particularly of service to the paralytic, or where the muscular tone of the intestine is lost by over-distention. Injections of catechu, krameria, and alum are useful, as they corrugate the muscular fibres of the bowels, and diminish the size of the pouches which may be formed in the intestines by accumulated fæces, particularly that in the rectum just above the sphincter. These astringent injections may be varied; they may be made of the red rose, krameria, oak bark, bistoria, catechu, alum, rhatany, nuxvomica, &c. They should only be small, 10 or 12 ounces, and not retained many minutes, so that the muscular fibres may readily contract.—Or, introduce tents into the rectum. (Fleury.) Or, champoo it. (Recamier.) Or, give ox-gall; as auxiliaries, add drinks of vegetable bitters, a tonic diet, and exercise in the open air. (Dr. Teissier, p. 100.)

Constipation during Pregnancy.—Inject into the rectum a drachm of the inspissated ox-gall, dissolved in a pint of warm water. [Dr. Allnatt.] This may be repeated every four hours until relief is produced. [Dr. Aldis, p. 102.]

Diarrhæa.—[*Chronic.*]—Give half-grain doses of oxide of silver, twice a day. [Mr. Butler Lane, p. 103.]

Diarrhæa in Young Infants.—Give castor oil with yolk of egg, and if necessary, add an opiate. Prescribe as follows, for an infant of from two to four months old: R. Ol. ricini, ʒj. to ʒiiss.; vitelli ovi semis; aq. aneth. feneculi, a. ā. ʒj. ft. emuls. sumat coch. parv. bis. die. From two to six drops of laudanum may be added, but this, as well as its amount

and frequency, must vary with the case. [Dr. Thomson, p. 104.]

HERNIA.—[*Radical cure of.*]—The means to be used are, excision of the testicle, incision of the sac, excision suture, and canterization of the sac, ligature of the sac after incision of the integuments, acupuncturation, and insertion of gold-beater's skin in the sac. These means, however, do not prevent a fresh hernial descent, although they destroy the sac. The best means for procuring closure of the hernial aperture, are trusses, ligature of the sac, and its envelopes, and the cutaneous plug. Trusses should not press too powerfully on the abdominal parietes, or they may produce inflammation or irritation of the parts, or the walls of the abdomen may become atrophied; or if the pad be very small and convex it may produce elongation of the aponeurosis and muscle, and thus weaken the parts. The operation by ligature is attended with considerable pain, and even loss of life. There are two ways of introducing the cutaneous plug—the first, to detach a piece of integument from the neighborhood of the ring, and introduce it into the aperture: the second is effected by drawing the loose scrotal integument into the inguinal canal, and to cause adhesive inflammation between the invaginated integument and the walls of the canal. M. Gerdy retains the invaginated integuments *in situ* by one or more sutures. Mr. B. Cooper, in performing M. Gerdy's operation, stitched the invaginated skin to the tendon of the external oblique muscle, and brought out the needle an inch and a half above Poupart's ligament; the needle was again passed into the canal, and brought out through the abdominal parietes as before, about four lines distant, and the skin between the two ends of the ligature was thus included and tied over a piece of bougie. [Mr. Teale, p. 247.]

STRANGULATED.—In order to determine whether the intestine be still living or not, wait a few moments after dividing the stricture, and see whether the discoloration becomes less intense; or press the blood out of the distended veins and see if they become rapidly refilled. If no evidence of circulation

exist, cover the intestine with integuments, or with a moist sponge, and wait a little while; the surface of the intestine may then be carefully and slightly scarified with the point of a lancet, and perhaps a slight oozing of blood will take place, if so, however discolored it may be, the intestines may be returned into the abdomen. Carefully press out the contents of the intestine and then replace it in successive portions; then pass the finger within the abdomen to determine that no portion of the intestine is engaged within the sac, and also to determine that the protruded knuckle of the intestine is not invaginated within a neighboring portion of the intestinal canal. When gangrene has taken place, and is general, make an incision through the whole length of the gangrenous portion, and leave it to slough away. This opening allows the contents of the upper part of the canal to pass away: but if this does not take place without dividing the stricture, this must be done with as little disturbance as possible. The wound must be left open, to facilitate the free discharge of matters, and simply dressed with wet linen, frequently renewed. Mr. Travers does not recommend division but dilatation of the stricture. Sir A. Cooper divided the stricture generally. Mr. Key also advises it. Brasdor's practice of excising the gangrenous parts and uniting the divided extremities by suture is universally abandoned. Recent adhesions, if there be no gangrene, are to be destroyed by the finger or handle of a scalpel—adhesion of two coils of intestine is also to be treated in this way. [Mr. Teale, p. 249.]

It is recommended by some practitioners, as Mr. Key, &c., to return the bowel without cutting into the sac, as there is less danger of peritoneal inflammation afterwards. The objection to this practice is the possible gangrenous condition of the bowel, many of the symptoms of which are equivocal, so that it is the best practice, after all, to open the sac. The great mortality attending these operations has been increased by improper after-treatment, as the early exhibition of purgatives. (Mr. South. p. 251.)

Enterotomy after operation for Strangulated Hernia.

—It sometimes happens that after the operation for strangulated hernia, and after the intestine has been returned, symptoms of strangulation remain; the part of the intestine is incapable of resuming its functions, and tympanitis comes on. Separate the edges of the incision, pass the finger into the abdomen, find the distended coil of the bowel, seize it with a pair of forceps, and by means of probe-pointed seissors, make an opening into it, through which the contents of the intestinal canal may escape; many a life may be saved by these means. (M. Maissoneuve, p. 254.)

ANUS.—(*Artificial*)—After the bowel has been strangulated so long that gangrene of a portion has taken place, and an artificial anus is formed, either by the knife or by sloughing, and the stools are passed out of the opening, try the ingenious method adopted by Mr. Trant, of Dublin, which consists of introducing a small silver tube (made by Mr. Millikin, of Dublin.) and pressing back the intermediate portion of the intestine lying between the abdominal and anal position of the artificial opening, and thus bring the parts into such relation that the stools can pass into the natural channel. In this way the opening may be gradually closed, and the functions of the part restored to the normal state. (Mr. Trant, p. 262.)

Fistula in Ano.—Pass a ligature through the fistula, bringing it out at the anus and gradually tightening it upon the included part; use a catheter wire, about as thick as small twine. (Dr. Colvan, p. 261.)

HÆMORRHOIDS.—Where the case is recent, and the protruded piles not large, the bleeding small, and the constitution not affected, give a few grains of blue pill and rhubarb at night, and a little infus. rosæ and epsom salts in the morning, for a few days; after which give the ordinary electuary of senna, sulphur, cream of tartar, and mel rosæ, or, what is better, treacle, as the mel rosæ often gripes. Also inject into the rectum a pint of cold water with a drachm of nitre dissolved in it; enjoin steady exercise, and moderation in diet. In thin delicate subjects, give tonics, particularly mist. ferri aromatica; and if there be any serious organic mischief, particularly of the

chest, interfere with the piles as little as possible. When the patient is becoming debilitated from the pain and irritation, as well as from bleeding, then remove the protruded hæmorrhoidal portions of the bowel, having secured them by ligature. (Mr. Hamilton, p. 257.)

Internal Bleeding Hæmorrhoids.—Inject after every alvine evacuation, solution of acetate of lead ʒj. to ʒviij. of distilled water; use two ounces of the solution for each injection; give an occasional blue pill, followed by a dose of castor oil and extract of taraxacum. To remedy the constipation usual in these cases, give the following confection: common resin, well powdered, one ounce; clarified honey, five ounces; half an ounce of balsam of copaiba renders it more efficacious, but is apt to disagree with the stomach. (Dr. Watson, New-York, p. 257.)

LIVER (Congestion of).—In diminished secretion, with pale or white stools, give mercury. In excessive secretion, increase the amount of oxygen inspired, and thus, during respiration there will be consumed materials that would otherwise be left for the liver to excrete; for while the carbon of the lungs is united to oxygen, and excreted in a non-combustible state, the carbon of the liver is non-oxygenized, is still combustible, and is intended, not for excretion, but absorption. Limit the supply of food which contributes to form bile, as spiritous liquors, butter, cream, fat, sugar, &c. The patient ought not to sleep immediately after a full meal, nor take suppers. (Dr. Budd, p. 106.)

Affections of the Urinary Organs.

URINARY DEPOSITS.—*Apparatus.*—A microscope, with a power of 300 diameters; test glasses; phials containing nitric and acetic acids, water of ammonia, and potash; some slips of blue and reddened litmus paper, and an urinometer.

Diagnosis.—Notice whether it be colorless, amber, saffron, red, &c., transparent or turbid; ascertain by litmus paper whether it be acid, alkaline, or neutral;

note its specific gravity ; set it aside to see if it deposit a sediment, or throw up a cream to the surface, or crystallize on the sides of the vessel. The urine should be recent, and if the patient have leucorrhœa or be menstruating, should be drawn off by a catheter ; take care to have the vessel clean.

Urates are in excess when the urine is acid, deposits on cooling, a red, pink, buff-colored or white precipitate, covering the bottom of the vessel with an even powdery deposit, usually copious, and dissolving by heat ; viewed by the microscope, a powdery appearance ; dissolved in nitric acid by a gentle heat, evaporated to dryness, and held over the fumes of ammonia, murexide of a beautiful red color is formed.

Uric Acid.—Urine highly acid, and deposits on cooling, a red, pink, or buff-colored sediment, adhering to the sides of the vessel in hard crystalline grains, having the appearance by the microscope of diamond-shaped plates or prisms ; the precipitate is generally scanty ; forms murexide the same as the urates, with nitric acid and ammonia.

When the urine is acid, alkaline or neutral, but turbid on emission, and deposits a white or yellowish sediment, and is not rendered transparent by heat, there will be present, phosphates, oxalate of lime, cristine, mucus, pus or blood ; if the

Phosphates, it is rendered apparent by acetic acid ; the earthy phosphates appear as amorphous powders by the microscope, the ammoniaco-magnesian, as triangular prisms.

Oxalate of Lime.—Not affected by acetic acid or ammonia, but rendered transparent by nitric acid ; deposit, when viewed by the microscope, consists of octohedral crystals.

Cystine.—Rendered transparent by solution of ammonia ; viewed by the microscope it consists of five-sided plates, clouded in the centres.

Pus or Mucus.—The sediment is whitish, and not dissolved by any of these agents ; viewed by the microscope it consists of minute, irregular, spherical bodies with granulated surfaces.

Blood.—Sediment red, and not dissolved by nitric

acid, heat or acetic acid; by the microscope it consists of minute yellowish bodies, the shape of a shilling.

The dissolved constituents in diseased states of the urine, are :

Bile.—To detect it, drop the urine and nitric acid a short distance from it on a plate of glass : as they meet examine them with an achromatic microscope, and if bile be present, a green color will be produced.

Albumen.—Sp. gr. 1.014, or lower ; heat coagulates the albumen, and this cannot be redissolved by nitric acid ; nitric acid coagulates the albumen.

Sugar.—Sp. gr. 1.025, or above ; taste sweet ; boil the suspected urine with an equal bulk of water of potash, if sugar be present the liquid will assume a deep porter or beer color.

TREATMENT :—Lithic Acid deposits.—Give gr. x. or wj. of bicarbonate of potash or soda, three times a day, and if the deposit be in the form of rhombic prisms, indicating gout, give colchicum, using local antiphlogistic measures, if the urine be sanguinolent or albuminous, and there be pain in the loins. If the deposit be amorphous, there is either excessive secretion of the solid constituents of the urine, or a deficiency in the secretion of water. In the former case, the sp. gr. is increased in proportion to the quantity ; give iodide of potassium three times a day in doses of 5 or 10 grs. In the latter, the quantity of urine is decreased, there will be fever either idiopathic or symptomatic, which must be removed, or dyspepsia, in this case give a scruple of alum three times a day in half a pint of water. If the sediment have a pink color, attend to the biliary functions.

Weakly Acid or Neutral Urine.—This shows that the kidneys are inflamed. If acutely, use general and local depletion, and exhibit emollients and contra-stimulants ; give wj. doses of iodide of potassium. If the inflammation be chronic, use local depletion and counter-irritation ; setons are very useful ; occurring during typhus, apply blisters to the loins, and give wine.

Oxalate of Lime deposits.—At first give tonics, the

mineral acids, vegetable bitters, astringents, &c.; and after some time give alkalies largely diluted. Alternate these plans, and persist steadily in their use. The following is a good tonic in these cases:—Infus. cascarill. 3vj. ; potass. nitrat. 3j. ; acid. nitrici dil. 3iss. ; tinct. opii 3j. M. sumat. cochl. duo amplater in die.

Albuminous Urine.—Use active depletion, both local and general; give nauseating doses of tartar emetic, and hydragogue purgatives; use the warm bath; give alkalies. Persevere in this treatment, but should the strength fail, and a cachetic state come on, depend on active counter-irritation, especially by setons. (Dr. Aldridge, p. 134.)

Albuminous Urine after Scarlatina.—If seen early, adopt antiphlogistic measures; and when active is succeeded by passive congestion, give two or three grains of acetate of lead three times a day, to prevent the insidious drain on the system, and then give muriated tincture of iron, to repair the anæmic state of the system. (Dr. O'Ferrall, p. 124.)

Diabetes Mellitus.—Tho sugar in this disease is formed not only in primary but also in secondary assimilation from the tissues, as the emaciation proves; hence the rigorous exclusion of non-azotized substances is not advisable, as it forces the disease to attack the living tissues, therefore allow at least farinaceous food. (Dr. Dick, p. 122.)

Exalt the tone of the secreting capillaries of the kidneys by balsams, ammonia, strychnia, and other excitants, when the perspiratory secretion is suppressed: if it be not, give chalybeates, alum sulphate of zinc, or other metallic astringents: give a moderate portion of animal food, porter, &c., but do not enjoin a strictly animal diet.

Diabetes Insipidus.—Give anti-spasmodics and mineral tonics, and apply stimulating liniments to the spine.

Purulent deposits in Urine.—Give tonics, to subdue the asthenic inflammation of the mucous membranes; decoction of the leaves of chimaphila corymbosa, diosma, crenata, arctosaphylos, uva ursi, or the root

of cissampelos pareira, combined with mineral acids ; also give chalybeates.

Hæmaturia.—Treat this disease in the same way as other vicarious discharges ; give astringents, as tannin ; or styptics, as oil of turpentine : when you give the latter be on your guard against nephritis. (Dr. Aldridge, p. 135.)

Bright's Disease, or Albuminaria.—Enjoin a general tonic regimen, avoid as articles of food, fat and other highly carbonized materials, attend to the functions of the skin and, bowels, relieve congestion of the gland, and, if necessary use small bleedings. (Dr. Johnson.) Make use of cautious small blood-lettings in the early stages, particularly if acute ; give hydragogue cathartics, and improve the general health ; do not deplete where the disease is chronic. (Dr. Williams.) In the very early stages change the mode of life and habits of the patient, enjoin pure air and careful attention to diet and exercise ; in this stage application for relief is seldom made. In the second and third stages, relieve congestion ; promote the flow of urine and the action of the skin, and prevent the deposition of fatty matters by a diet which contains neither fat, nor butter, nor any of those non-azotized substances nearly allied to it, as starch, sugar, potatoes, &c. (Dr. Todd, p. 110.)

In the acute form, remove congestion of the kidneys by blood-letting, regulated according to the intensity of the disease and the patient's strength ; restore the function of the skin, by keeping the patient in a warm atmosphere, giving mild diaphoretics, and the use of the warm or vapor bath.—Dr. Barlow gives tartar emetic. Next, remove the dropsy, by diuretics and purgatives, nitrate of potash, in doses of two scruples or more, with digitalis and cream of tartar ; the nitrate should be largely diluted.

In the chronic form, first attend to the function of the skin by warm clothing, diaphoretics, and the warm bath. Give tincture of cantharides in doses of from four to twelve drops, in some emulsion. (Dr. Bright.) Dr. Wells and M. Monneret advise thirty to sixty drops in twenty-four hours ; or give ioduret of iron (M. Gutbrod ;) or hydriodate of potash, and use iodine

ointment (M. Alken) ; or give chalybeate tonics, saline purgatives, and nutritious diet (Dr. Reese) ; or equal parts of tinct. of cantharides and tinct. of sesquichloride of iron (Dr. Copeland).

Treat the dropsy with cream of tartar and digitalis (Dr. Christison), give from a drachm to a drachm and a half of the former three times a day, and at the same time a pill containing one or two grains of powdered digitalis, or twenty drops of the tincture in cinnamon water ; give a blue pill (grs. 5) every night for four or five nights. Diuresis may often be established by an emetic of ipecac, and tartar emetic, or by a hydragogue cathartic ; should these fail, give squills, broom, spirit of nitric ether, or Hollands and water, or carbonate, nitrate, or acetate of potash ; or decoction of horse radish (Rayer). Diuretics do not cure the disease, they can only relieve the dropsy.

Try Seidlitz or Pullna water ; cream of tartar in half ounce doses (Rayer) : give five, seven, or nine grains of gamboge, once every two days, triturated with bitartrate of potash, to prevent griping. Combat the concomitant affections of the digestive organs with creasote (Dr. Christison) ; give it as a pill, one drop of creasote, two grains of rhubarb, and one grain of extract of gentian, for the mass ; or with the sedative solution of opium ; or with extract of opium and nitrate of silver, half a grain of each in a pill. Apply sinapisms, turpentine epithems, or a cantharides blister, externally ; sprinkle the blistered surface with muriate of morphia ; check diarrhœa by chalk, astringents, and opiates ; or give acetate of lead with opium, or strychnine with opium.—Dr. Wood, p. 120.

INCONTINENCE OF URINE.—(*The result of stricture.*) Endeavor to remove or relieve the stricture by bougies or catheters ; when these fail, the lancetted stilette, Mr. Stafford's, may be sometimes resorted to with advantage. It is a dangerous instrument, and should be used with great caution. It should be firmly pressed against and then through the stricture, and after it be withdrawn a catheter should be introduced (Lawrence). The tone of the bladder, after retention of urine, may be restored by giving ergot of rye in two-scruples or drachm doses, twice a day, about an hour or two

before the bladder begins to feel uneasy from the accumulation of water.—Braithwaite, p. 297.

LITHOTRITY.—The best instrument for performing this operation with, is the two-branched curved instrument of Baron Heurteloup. A new instrument, by means of which a large calculus may be ground to powder in a few minutes, by oscillatory movements, it is worthy of attention.—M. Leroy, p. 273.

Prepare the patient for the operation by enjoining a light diet, abstinence from fermented liquors, clear out the bowels, and order the hip-bath; if the urine be acid, give alkalis combined with uva ursi or Peruvian bark; if alkaline, give the mineral acids; and if mucous deposits, infusion of Pareira brava; enjoin absolute rest, and use occasionally an anodyne enema. The urethra is to be gradually dilated, if necessary; when preternatural contraction of its orifice exists, divide it. Introduce the catheter frequently, as it allays the irritability of the bladder and urethra. The objects of the operation are to reduce calculi within the bladder to such a size that the portions may be removed or discharged through the natural passages, to effect this by such means as shall excite no dangerous irritation in the urinary organs, and to free the bladder from the small fragments which remain. Great care should be taken that the case be a suitable one for the operation, as in some cases cystotomy must be preferred. Lithotritry may be performed where the bladder is perfectly healthy and the stone is small; and it is decidedly advantageous where there is phthisis or albuminuria. It is a great and valuable addition to surgical therapeia, but cannot, be considered as a substitute for cystotomy, since there are numerous cases in which the last operation will prove the safest and most effectual.

Cystotomy, for example, is preferable in boys before the age of puberty; it is so simple and the urethra is so small as not to admit of the lithotrite. Cystotomy is also preferable in the female; also where the calculus has attained a very large size; also where the prostate gland is enlarged, unless the calculus be of very small size.—Dr, P. Crampton, p. 266.

PROSTATE GLAND—Enlargement of.—Charge a

bougie with iodine, or iodide of potassium, and then dip it into melted tallow, so that a coating may be formed upon it; then introduce it up the urethra to the part desired, and let it rest upon it until the tallow melts, and the iodine, &c., comes in contact with the diseased part. The preparation of iodine must at first be very mild; a grain of iodide to the drachm of lard, gradually increased in strength as the patient can bear it, to two, three, four, five, and even ten grains, or a scruple to the drachm; after this, add iodine to it, half a grain, gradually increased. The bougie must be introduced with great care,—Mr. Stafford, p. 573.

Affections of the Organs of Generation.

SYPHILITIC AFFECTIONS.—(*Chancre*)—Wash the part well with warm water, and then apply the solid nitrate of silver; it will completely destroy the affection, if not more than three days' standing. If it be a pustule, evacuate its contents, and the walls of the pustule are to be well cauterized. When there is a chancre of the frenum, it is more readily healed by dividing it, and cauterizing the whole of the divided surface. To check discharge, apply a solution of pure tanin.—two grs. to the ounce of water; or sulphate of zinc solution, in private practice, as the former tells tales by staining the linen. The caustic should be re-applied as soon as the eschar is removed, or about once in twenty-four hours. If lint have been applied after the caustic, take care to soak it well before you remove it, or the eschar may be detached, and the part made to bleed. If the case be seen early, one or two burnings will suffice; if at a more advanced period, it must be repeated at intervals of twenty-four hours—for a week or ten days, or as long as we consider any virus is secreted by the sores, which is known by the ulcers remaining stationary, and the surface being covered with a yellow pellicle; when becoming healthy, granulations spring up and the sore heals. Caustic is not so efficacious when the chancre is situated on the frænum, orifice of the uretha, around the prepuce, or on the fourchette, in

the female :—enjoin rest and strict attention to cleanliness, and avoid rupturing the cicatrix. (Acton. p. 274.)

BURNS.—Apply a blister the size of a crown for twenty-four hours, then raise the cuticle, and apply a pledget of lint of corresponding size, well saturated with a solution of bichloride of mercury, (a scruple of the salt to one ounce of spt. vini rectif.) ; keep it *in situ* from two to four hours, and then apply cold applications for some hours ; an eschar is formed, which will be thrown off, and the tumor will be dispersed. (Malapert, p. 283.)

Gonorrhœa.—Inject the urethra with a solution of copaiba. (Ricord, p. 294.)

Chordee.—Give from 25 to 50 minims of the vin sem. colchici, for several successive nights. (p. 295.)

Or, vin colchici. ʒij. ; magnes. carb ʒj. ; iodide of potassium, ʒss. ; aquæ ʒvss. M. ʒj quartis horis sumend, Or give a combination of iodide of potass and decoct. sarze comp. (p. 295.)

Gleet.—Apply the following ointment, which answers much better than the nitrate of silver : kino, ten parts ; sulphate of zinc, one part ; lard twenty parts. (Dr. Leroy, p. 290.)

Stricture.—Dilatation.—There are three modes of performing dilatation. 1. Slow or permanent ; the catheter is left in the urethra and changed every three or four days. 2. Continuous or sudden ; changing the catheter every six or seven hours. 3. Temporary or progressive ; retaining the catheter or bougie, from five minutes to one hour. Never employ force in introducing a bougie, and when you increase the size do not do it from day to day, but at the same sitting, i. e., commence with that which passed freely the day before.

When a bougie cannot be passed, but the urine flows off, use Dr. Leroy's apparatus for keeping the pressure of a bougie constantly against the part ; or press the end of the instrument against the obstacle for a quarter or half an hour daily, and after each sitting, try to pass a small bougie : when these means fail, apply the caustic bougie.

When the stricture produces complete retention of

urine, endeavor to pass bougies in conjunction with bleeding, baths, &c. : try the application of tobacco smoke ; should these fail, press a small catheter against the obstacle for an hour. Cut down upon the urethra posterior to the obstacle, but should a calculus be there detained, cut through the rectum. If necessary to puncture the bladder, do it through the rectum. M. Lallemand cuts down on the strictured part itself. (Dr. Leroy d'Etiolles, p. 286.)

Secondary form of Syphilis.—Give the proto-iodide of mercury, and should it occasion irritation, in the bowels with diarrhœa, combine it with opium. Let the diet be simple, avoiding all stimulants whether solid or fluid ; the diet, however, should not be debilitating but nutritious. Cold and damp air is very injurious ; fresh air is highly necessary. (Ricord, p. 280.)

Tertiary form of Syphilis.—The characteristic of these symptoms, is there not being transmissible hereditarily. They are manifested chiefly in the subcutaneous or submucous cellular tissue, in the fibrous, osseous, cartilagenous, muscular, or nervous tissues and in organs in their locality. The remedy most to be depended upon is mercury. (Ricord, p. 280.)

PARTURITION, AND DISEASES OF WOMEN.—Placental Presentation.—Whatever the condition of the mother merits, turn the child, and extract the placenta. The placenta should never be detached first, unless the danger to the woman is so great from exhaustion, as to render turning hazardous ; or, unless there exists some obstacle to the attraction of the child, either from distortion of the pelvis or from tumors.

Neither delivery by turning, nor detaching the placenta, ought ever to be attempted until the cervix and os uteri will safely allow the introduction of the hand. Until this is the case, strict rest, the application of cold, and the use of the plug, will be required.

Detaching the placenta will be found the best line of practice. 1st, in severe cases of unavoidable hæmorrhage, with placenta prævia, complicated with an os uteri so insufficiently dilated and undilatable, as not to allow of turning with safety ; 2d, in many

of the cases in which placental presentation is connected with premature labor, and imperfect development of the os and cervix uteri ; 3d, when the uterus is too contracted to allow of turning ; 4th, when the pelvis or passages of the mother are organically contracted ; 5th, in cases of such extreme exhaustion of the mother, as forbid immediate turning or forced delivery ; 6th, when the child is dead, and when it is premature and not viable. (Drs. Simpson, Radford, &c., p. 316.)

Galvanism.—This powerful agent may be used to induce or increase uterine action in cases of hæmorrhage, before, during, and after labor ; in cases of placenta prævia where it is inexpedient to rupture the membranes and turn ; in internal hæmorrhage, depending upon uterine inertia. Its effects are instantaneous and much more to be depended upon than ergot, although it is advisable to try the secale first, and it will be found especially useful in those cases where exhaustion is so great as to render it dangerous to deliver the child in the ordinary way. (Mr. Dorrington.)

In cases of accidental hæmorrhage, in the latter months of gestation, where the os uteri is rigid and nearly closed, and the flow of blood cannot be arrested by ordinary means and more especially if there be uterine inertia, galvanism will be useful. In applying galvanism, one conductor should be passed up the vagina to the os uteri, in which a moistened sponge is introduced, and the other to the abdominal parietes, over the fundus in order to pass the current through the long diameter of the uterus, or they may both be applied externally in the short axis. The galvanic action should not be continued too long, and should be interrupted so as to allow the uterus intervals of rest, and so to imitate nature's operations. (Dr. Radford, p. 334.) Galvanism may also be used as a *dernier, ressort* in hæmorrhage during the first month of pregnancy. (Mr. Wilson, p. 336.) Electro-magnetism may be applied in cases of uterine inertia during labor. (Mr. Clark, p. 337.)

Uterine Hæmorrhage.—When danger to life is imminent, give opium freely ; five grains for the first

dose, and two or three every hour or half hour afterwards, until the pulse becomes distinct, the breathing easier, and the tossing about in bed allayed. At the same time, give warm wine and brandy, and apply heat to the extremities. (Dr. Griffin, p. 338.)

Uterine Hæmorrhage after delivery.—In cases where on previous occasions, there has been hæmorrhage after the birth of the child, prepare an infusion of secale, 3j. to 3iv. of boiling water, and when the child's head has just cleared the external orifice, give half of it [along with the powder]; and when the child is entirely expelled give the remainder. (Dr. Beatty, p. 338.)

Give ergotine in doses of two grains every two hours. It has been found serviceable in cases of uterine hæmorrhage, whether acute or chronic, and dependent on a dynamic or an organic cause.—Ebers, p. 339.

When hæmorrhage becomes alarming, after the expulsion of the placenta, turn the patient on her back, and grasp the uterus firmly with the hand, through the abdominal parietes, until it contracts; then take a small bowl or basin capable of holding twelve or fourteen ounces, having a thick smooth edge, and invert it over the body of the compressed uterus, taking care that the whole of it is compressed within the cavity of the basin, which is to be confined *in situ* with the bandage.—Mr. Harvey, p. 339.

Mr. Pretty has invented an apparatus by which he applies pressure to the abdomen to avert hæmorrhage after delivery; it consists of a central and two side pads, fastened by a strap, and tightened by means of a tourniquet; it is portable and easy of application.—Mr. Pretty, p. 340.

Transfusion.—This should be adopted as a last resource when the patient is sinking. Mr. Brown reports a successful case in which he performed it, where there was the most alarming prostration, but no extraordinary discharge of blood.—p. 341.

Forceps, application of, in Occipito-posterior Positions.—In these cases the forehead should be made to rotate backwards, and the occiput forwards; i. e.,

the extraction of the head with forceps should be an exact imitation of the mechanism of the expulsion of the head by nature.—Dr. Simpson, p. 343.

Forceps, how to apply.—Having ascertained the exact position of the head, introduce the hand, well smeared with lard, within the os uteri; search for, and pass the fingers over the ear, so as to guide the blade over that organ, whatever may be its position. When the instrument is locked do not tie up the handles with tape, as it keeps a degree of pressure on the child's head not consistent with its safety. In acting with the forceps, always bear in mind the different axes of the pelvis, viz., of its brim, cavity, and outlet; therefore keep the handles of the instrument back to the perineum, till some part of the occipital bone has cleared the arch of the pubis, and when this occurs, gradually bring the handles towards the pubis, when the chin will pass over the perineum. The three powers of the forceps are brought into operation, viz., compression, traction, and leverage; but compression ought never to be made beyond diminishing the child's head to three inches, indeed, instruments are seldom constructed to admit of more.—Dr. Wilson, p. 349.

Uterus, Inversion of, from short Funis.—When this occurs, lose no time in separating the placenta from its attachments, and with clenched hand replace the uterus; taking care not to withdraw the hand until the uterus contracts.—Mr. Smith, p. 359.

Prolapsus Uteri.—Mr. Eagland, surgical instrument maker, of Leeds, has constructed a very efficacious instrument for keeping the prolapsed womb in position.

Speculum Uteri.—Dr. Protheroe Smith's new speculum uteri consists of a glass cylinder fitted to an outer one of metal, within which it slides. The inside of the metallic tube is highly polished, the reflecting powers of which are increased by the glass cylinder; the edge of the smaller or uterine extremity, is carefully rounded into a smooth ring, which projects slightly from the inner surface. In its side is cut an oval aperture of about three inches in length and two in breadth, extending to within half

an inch of the end of the cylinder. Its other extremity consists of a rim which projects about a line from the external surface of the tube, having its surface blackened for the absorption of any rays of light, which might otherwise be reflected, and impede the view by the dazzling effects. There is also a corresponding rim to the glass tube, by which it is more conveniently withdrawn from the metallic cylinder.—Dr. Smith, p. 352.

Dr. Adam Warden has invented a new speculum uteri, particularly adapted for examining the posterior lip of the os uteri.—p. 353.

Mr. Ferguson of King's College, has also recommended a speculum uteri, in which the reflecting surface, which is very brilliant, cannot be tarnished by any discharges or lotions. It is a very cheap instrument.—p. 356.

Ricord's speculum uteri consists of two valves, united about the middle point, allowing both extremities to be widely opened; the narrowest part is thus placed at the vulva. To each valve a handle is attached, by which means space is gained, and the light falls upon the interior uninterruptedly, and pressure upon them causes a dilatation of the two extremities which can be maintained, diminished or increased by means of a screw.—p. 481.

Mænorragia.—Give oxide of silver in half grain doses twice or thrice a day. It will be of the most use when the hæmorrhage is of a secretive character, occasioned by local excitement, and not from the rupture of blood-vessels.—Mr. Butler Lane, p. 103.

Give nitrate of silver internally. Argent. nit., gr. iij.; aquæ distillat. ℥ij; solve. Give ten drops three times daily, and gradually increase the dose to fifteen drops.—Dr. Ditterich, p. 361.

Pruritus Vulvæ.—Apply thrice a day to the affected parts by means of a piece of sponge, the following lotion; Sodæ borat., ℥ss.; morphiæ sulphat., gr. vj.; aquæ rosæ distillat., ℥viij. M, ft. sol.—p. 361.

Affections of Joints.

KNEE JOINT.—Inflammation of Synovial Membrane.
—Keep the joint perfectly at rest ; for this purpose, when the disease is chronic, apply splints of thick leather, one on each side of the joint, keeping them in place with a bandage. Steep the leather well in hot water, so as to make it exactly fit the joint. When the cure is nearly completed, the patient should wear an elastic bandage, so as to allow of a little motion, within certain limits, and the heel of his shoe should be raised a little, to keep the knee slightly bent.

In the acute disease, use general antiphlogistic measures, as well as the local abstraction of blood. After giving a brisk purgative, then give twelve minims of *vin. colchici* in a saline draught three times a day ; in two or three days stop its exhibition, and after an interval of a day or two give it again ; it is most useful when there is a gouty diathesis, with lithates in the urine ; an occasional purgative is necessary during the administration of the colchicum, and also small doses of blue pill to keep up the secretion of bile which colchicum diminishes. Give mercury so as to affect the system ; this may be done not only in the gouty diathesis, but also where there is rheumatic inflammation, and combine it with opium, as in iritis.

In chronic inflammation the same measures as in the acute, only not quite so active ; leeches ; blisters, apply them in succession, or keep one open with savine cerate ; give colchicum as an alterative, two grains of the extract with as much blue pill, every night, and an aperient every third or fourth morning ; or give the acetous extract, with calomel and comp. ext. of coloc., every second or third night. Give, also, iodide of potassium in small doses, combined with alkaline remedies. In slight cases, use liniments to the joint, *lin. vol. camph. and sp. terebinth.* ; or *olei olivæ 3jss. ; acid sulph., 3j. ; and sp. terebinth. 3ss. ;* or paint the knee with a solution of iodine. When ulceration of the cartillages is going on give mercury so as to affect the system, calomel and opium

two or three times a day ; mere alterative doses will not do ; in a few days the pain will be quite relieved.—Sir B. Brodie, p. 185.

Abscess.—Make a free opening, and keep the joint in a state of absolute repose, by means of leathern splints, or by supporting it with pillows and cushions. The articular cartilages will have become absorbed, and recovery by ankylosis is the result ; the joint during recovery must be supported with leather splints : or if the leg be bent on the thigh, use the screw instrument, with splints at the posterior part of the leg and thigh.—Sir B. Brodie, p. 188.

Gouty Inflammation of.—Some of the smaller joints are affected first, and there is seldom much effusion within the joint.—Give a grain of acet. ex. of colchicum, a grain of blue pill, and three grains of ext. of hop, every night, with a gentle aperient every third or fourth morning ; after giving these pills for a fortnight, stop them for two months, and then give them a fortnight again, and so on ; give also a grain and a half, or two grains of iodide of potassium, with ten or twelve grains of bicarbonate of potash twice a day, for six or eight weeks at a time. This system must be continued, with occasional intermissions, for one or two years, or even longer. This chronic gouty affection is not in itself dangerous, but it shows a bad constitution, and the person thus affected is liable to other diseases.—Sir B. Brodie, p. 185.

Scrofulous Disease of.—Never abstract blood, nor make use of counter-irritation. Here, as in all diseases of joints, a state of perfect repose is necessary ; use the leather splints. As soon as the digestive organs are brought into a proper state, give tonics, particularly chalybeate tonics. To children give the vinum ferri of the old Pharmacopœia, for three weeks, and then omit it for ten days, and so on for several years, so as to improve the weak constitution. If fever be produced, decrease the dose, or omit it altogether for a while ; or give the tinct. ferri mur. ; or the syrup of iodide of iron ; or the latter and the vin. ferri alternately.—When you have a patient with whom no form of iron will agree, then give quinine, bark, or alkaline solution of sarsaparilla ; the latter

is very useful to delicate children. Change of air is highly beneficial, the sea-side ; when the joint has become stiff, do not use force to straighten it ; it should be done gradually, by means of a screw apparatus ; if an abscess forms in the joint, continue the use of the splints ; but have them lined with oil-silk. If the disease have been neglected, or it has been found impossible to save the joint, amputate as soon as possible. If, by examination with a probe, it is found that there be a piece of dead bone within the joint, so that it cannot exfoliate, the sooner the limb is amputated the better. Bony ankylosis takes years for its completion, so that if the limb be bent there will be plenty of time to get it into its proper place.—Sir B. Brodie, p. 190.

Primary Ulceration of the Cartilages.—Keep the joint perfectly at rest, and use setons, issues, blisters, and counter-irritants. The great remedy is mercury ; two grains of calomel and one-third of a grain of opium, three times a day, until the gums are affected. Where mercury cannot be borne, give sarsaparilla and iodide of potassium ; sarsaparilla should also be given after the course of mercury. Ung. hydrarg. may be rubbed into the thighs where it cannot be borne internally.—Sir B. Brodie, p. 191.

Morbid Alteration of Structure of the Synovial Membrane.—Apply pressure by means of several alternate layers of diachylon plaster and bandage ; and afterwards by leather splints, and a firm bandage ; attend also to the general health.—Sir B. Brodie, p. 192.

Loose Cartilages in the Knee.—Remove them by operation ; get the cartilage fixed over the outer or inner condyle, and while it is retained in that situation, divide slowly the skin, cellular membrane, fascia, ligaments, and synovial membrane ; hold the knife with a loose hand, or the cartilage will be pressed into the joint ; lay hold of it with a tenaculum, but should it recede within the joint, never grope for it, but bring the edges of the wound together, and perform the operation at some other time. A valvular operation has been proposed.—Sir B. Brodie, p. 193.

Hip-Joint, Inflammation of.—Put the patient under

mercurial influence. Before commencing treatment determine the probable duration of the disease, as the efficacy of the action of mercury depends much on the stage in which it is used.—Dr. O'Ferrall, p. 194.

Dislocations.—Instead of using extension by the hands of assistants in reducing dislocations, make use of a little click wheel, fixed to the wall, and a rope attached to it; the extension is not only made more easily, but much more gradually.—Mr. Terrey, p. 202.

Compound Dislocation of the Astragalus.—When it is necessary to remove the astragalus, or saw off the end of the tibia, in order to return the bones to their place, never make a fresh incision to effect it, if there is already an extensive wound in another direction; rather amputate the limb at once, the chances of recovery will be so much greater. [Sully.] The late Mr. Colles, of Dublin, was opposed to amputation in compound dislocation of the ankle joint; and when advisable, he thought it best to wait until the symptomatic fever had subsided.—p. 200.

Immobility of the Lower Jaw.—Keep up mechanical extension for a considerable period, gradually increasing it. An excellent instrument for this purpose has been constructed by Mr. Gay, of Leeds, under the direction of Mr. Teale. (See wood cut.)—Mr. T. P. Teale, p. 197.

Affections of the Senses.

EYE, Inflammation of—Acute.—Bleed and give nauseating medicines, purgatives, and low diet, and stimulate the liver, kidneys, and skin, to rid the fluids of pernicious ingredients. In the second stage, to prevent or arrest the consequences of inflammatory action, give mercury or iodine, bark, colchicum, turpentine, &c. In the third stage, when the inflammatory action has subsided, apply belladonna, and give mercury or iodine in smaller doses, and for longer periods, with local stimulation and cutaneous irritation.

When the disease has been treated with mercury, and returns, try depletion and antimonials, with con-

finement to bed, and low living, for two or three days before you again resort to that remedy. Give tartrate of antimony or James's powder, so as at first to cause nausea, and afterwards diaphoresis. Mercury is the sheet anchor, given so as just to affect the gums; at first, give three grains of blue pill, three grains of compound colocynth powder, and one-eighth or one-tenth of a grain of tartrate of antimony three times a day, for a couple of days; then five grains of blue pill, with the same quantity of antimony, for two days more; and finally five grains of blue pill three or four times a day. If it affect the bowels, add a little opium to it. This produces a mercurial effect upon the system in seven or eight days. Or two grains of calomel and a quarter of a grain of opium may be given every four or six hours, if we wish to affect the system sooner. The length of time we are to continue the mercury must be decided by its effects.

Iodine, turpentine, colchicum, and bark, are valuable where the inflammation is modified by specific disease, or constitutional derangement, or where mercury has already been given, or cannot with safety be used.

From the very commencement of an attack of iritis, extract of belladonna should be used. Mix it with water until it acquires the consistence of cream, and paint the eyelid, brow, and upper part of the cheek with it; let it dry, and then apply it again, and cover it with a little damp linen, and keep it moist by applying a lotion made with two drachms of the extract to eight ounces of the water. If its application be not found comfortable, it need not be applied more than once or twice in twenty-four hours. When its application to the skin does not affect the pupil, drop a little of the solution upon the conjunctiva, even during the inflammatory attack; its effects soon pass off. It is best to apply it in the morning.—Dr. Jacob, p. 308.

In the external forms of ophthalmia, apply an ointment of oxide of silver, a drachm to the ounce. This is very analogous to Mr. Guthrie's black ointment.—(Mr. B. Lane, p. 103.)

Accidental Cataract.—Two modes of treatment ;
1st.—To allow absorption to take place ; the inflammation to be reduced by leeches and mercurials, as in internal ophthalmia ; apply belladonna so as to dilate the pupil.

2d.—Remove the fluid mass of cataract by extraction of the lens through a small incision in the cornea (Barton and Gibson) ; make the puncture at the temporal margin of the cornea with the extraction-knife, or with Mr. Walker's instrument, which combines the properties both of scoop and knife, and carry the point of the instrument into the pupil, when the lens will be discharged with the aqueous humor.—Mr. Walker, p. 314.

Depression of the Crystalline Lens.—The lens should be disengaged from its capsule in depressing it. To accomplish this, introduce the cataract bistoury through the coats of the eye, about a line and a half from the margin of the cornea ; it penetrates the vitreous humor, and forms a breach in it, at the proper place for the reception of the lens when depressed ; the point of the instrument directed towards the lens, is to be pushed across the eye to its opposite side, then penetrate the posterior part of the capsule, and, by drawing it outwards, incise it across its middle ; then push the point of the needle between the lens and the iris, its flat side placed on the lower part of the lens, and press it backwards and upwards, then shift the point of the needle forwards upon the lens, and this presses it backwards into the breach of the vitreous humor, from whence it does not rise.—Dr. Watson, p. 314.

Wounds of Eyelid.—If a large piece of skin be lost, and the edges cannot be united, subsequent ectropium is avoided by making an incision a quarter of an inch from the edge of the wound, which then allows the edges to be united.—p. 313.

Fistula Lachrymalis.—Dilate the nasal duct by means of Morgan's sound and catheter ; pass the sound along the floor of the nose, directing its point outwards, until it lies fairly below the inferior turbinated bone, then direct the point of the instrument upwards, and move it gently backwards and for-

wards along the inferior surface of the turbinated bone, until a little cartilaginous ridge is felt—this is the orifice of the duct; depress the handle of the instrument and its point glides into the duct. No force must be used, as the bony structures are very delicate; repeat it daily until the resistance is overcome, and then keep the passage clean by injections of warm water. When well, the patient should be taught to pass the instrument, to clear away collections of mucus. This instrument supersedes the use of the style.—p. 312.

SKIN DISEASES.—Chronic Eczema of the Face.—Give three or four drops of liq. arsenicalis three times a day, and cover the part day and night with lint spread with zinc ointment, or with ung. hyd. pccip. alb.; or, give five grains of Plummer's pill every second night, and a saline draught twice a day, giving at the same time a course of Harrowgate waters; regulate the diet, avoiding all stimuli. Where the temperament of the patient is irritable, arsenic and cantharides aggravate the disease.

It often attacks the ears of young females in whom menstruation is irregularly performed; this function must be established by the usual means; apply bread and water poultices to the part during the night and cover it with rags spread over with zinc ointment during the day; and give ten grains of pil. aloes c. myrrh. every second night at bed time. After using these means for a week or two, give minims of tinct. of cantharides, and thirty of liq. potass. twice a day.—Mr. Erichsen, p. 297.

Eczema of the Scrotum, Penis and Anus.—Cover the parts with lint, wet with lead lotion, and enclose them with oiled silk, in order to keep off the air, and to prevent urine getting upon the part. Give a small dose of hydr. c. creta at night, and a dose of castor oil in the morning; in a few days substitute zinc ointment for the lotion, and give small doses of liq. potassæ, and five grains each of calomel and magnesia, twice a day. If it be of long standing, enjoin a strict diet, abstinence from fermented liquors, salted and heating articles of food, and give 20 minims of liq. arsenici et hydrarg. iodidi twice a day, with five grains of Plum-

mer's pill at bed time, and apply a mixture of zinc ointment and the ung. plumbi acetat. to the parts by means of a piece of lint cut to the proper shape. The treatment must be persisted in for a length of time. A little extract of belladonna rubbed down with the ointment, often succeeds in allaying the irritation.—Mr. Erichsen. p. 299.

Eczema of the Scalp.—If occurring to a child, otherwise healthy, about the period of dentition, be careful how you check the eruption. Cut the hair, apply bread and water poultices, and subdue irritation by application of rags dipped in olive oil, or smeared with zinc ointment; or sprinkle the part with the nurse's milk. Give small doses of hydrarg. c. creta and castor oil, and lance the gums, if necessary. Fluid magnesia is often useful. If it becomes inveterate, wean the child on beef-tea, broth, and a nutritious diet, and give mild tonics, a few drops of tincture of ammonio-chloride of iron, or iodide of iron, twice a day (from half a grain to two grains of the latter); a great part of the treatment consists in keeping the scalp so covered as to prevent the access of air.

When it becomes chronic and inactive, and presents a furfuraceous appearance, have recourse to gentle stimulants; a lotion composed of from one to two drachms of sulphuret of potass, either alone or combined with an equal quantity of the carbonate of the same alkali, in a pint of plain or lime water; wash the head with this lotion three times a day; at the same time, every night after the last application of the lotion, apply an ointment composed of from a scruple to half a drachm of carbonate of potass to an ounce of lard, or one of creasote in the same proportion, or of white precipitate; or use the ung. hydr. nit. dil., or the sulphur ointment, or a mixture of this and tar or creasote ointment. Do not use the oiled-silk cap; it confines the perspiration and soddens the skin, producing a state of passive congestion which we wish to get rid of.—Mr. Erichsen. p. 301.

Chronic Eczema of the Hands.—In the early stages apply water-dressing by means of oiled-silk gloves or finger stalls, and at a more advanced period, a

solution of nitrate of silver (grain j. to the ounce), instead of the water-dressing; or a solution of carbonate of soda, (grain ij. to iv. to the ounce); or the following lotion: acid hydrocyan. 3ss.; zinci oxidl, 3j.; aquæ roeæ. ʒviij.; or cover the hand with the ung. hydrarg. precip. alb.; either alone or mixed with citrine ointment.

If the disease only occupy a small patch, cover it with a slice of lemon. Its spreading may be chocked by applying the solid nitrate of silver around the part. Constitutional treatment must also be adopted: remove any gastric, intestinal, or uterine disturbance, and give vegetable bitters, nitric acid diluted, or small doses of bichloride of mercury; the two latter may be given in infusion of bark. If two disease be of very long standing, give Fowler's or Donovan's solution. The hands should be kept at rest.—Mr. Erichsen, p. 304.

Chronic.—Apply tar externally; give it also internally; in capsules.—p. 305.

Pityriasis.—External applications of a soothing nature; baths medicated with mucilage of linseed, milk, yolk of egg, &c.; at the same time give demulcents, diuretics, &c., to increase the renal secretion. Cover the parts over with glycyrrhine; it remains fluid, and resists evaporation under any temperature to which the body is exposed. It is abundant in the refuse of the soap-maker.—Mr. Startin, p. 306.

Itch.—Immerse the hands of the patient in an alcoholic solution of stavesacre for half an hour together, two or three times, and the *acarus scabiei* will be destroyed. (Dr. Burgess.) Use a lotion made of an ounce of sulphate of copper to a pint of water; wash off the scabs before using it. It is an almost certain cure. (Mr. Loyd.) Use a lotion of iodide of potassium in the day, and sulphur ointment at night; a cure may be expected in seven days. The lotion should be ʒi. of iodide to ʒviij., or ʒxvj. of fluid.—Dr. Ward, p. 307.

Warts.—Apply hydrochlorate of ammonia dissolved in water, or hydrochlorate of lime; persist in their application for some time.—p. 308.

Syphilitic Alopecia.—Cut the hair close, and use

warm baths ; and then apply the following liniment. Equal parts of rectified spirit, Eau de Cologne, and castor oil ; or equal parts of honey-water and tinct. of cantharides. Should little red spots or blisters be produced, cease the application for a short time.

Lichen, Lepra, Psoriasis, Impetigo, &c.—Frequent warm baths, taking care to soak the head well ; and cover the spots night and morning with olive oil, ℥ss. ; citrine omit. ℥i. ; M. Make a liniment, or use the following ointment : purified beef marrow, sixteen parts ; sulphur ointment, sixteen parts ; turpeth mineral, two to four parts ; essence of lemons sufficient to scent it.—Ricord.

Mucous Tubercles.—Use a dilute solution of chloride of sodium ; dry the parts and sprinkle them over with calomel.—Great cleanliness is necessary ; do not use ointments.

Eczma Impetiginoides.—Cut the hair close, and apply water dressing, or lint dipped in an aqueous solution of opium ; do not apply ointments. It should be a rule never to apply greasy substances to any eruption attended with ooziug of fluid, since it mixes with the secretion, becomes rancid, forms a crust, the edges of which become excoriated, and what was an effect, becomes a cause, of irritation. Paint gummata and nodes with tinct. of iodine : it may also be applied to unhealthy tertiary ulcers.

Give internally in secondary forms of syphilis, iodide of potassium or mercury ; some prefer the former, as Dr. Williams, others the latter, as Sir B. Brodie. The following should be our guide in giving the iodide of mercury : Secondary symptoms occurring after a course of mercury, will be benefitted by a course of iodide of potassium. Secondary symptoms occurring where mercury has not been used, will not yield to the iodide, but will to mercury. In order to prevent the iodide from causing pain at the pit of the stomach, or heat at the back of the throat soon after swallowing it, dissolve two drachms in three ounces of water, and let the patient take a teaspoonful of this solution night and morning in a large cup of tea, and the same quantity in half a pint of beer, or other fluid, at mid-day ; the dose to be con-

tinued and increased according to circumstances. It is of no use increasing the dose, or indeed of continuing this remedy beyond a week or ten days, if no amendment is visible. If mercury has not been given for the primary symptom, begin with it immediately when secondary symptoms appear. Ricord gives the pure mineral, but the hydr. c. creta will answer best. If the organs of digestion be impaired, use friction; direct the size of a horse bean of ung. hydr. to be smeared on the inside of each calf of the leg every night; do not rub it in, as you irritate the hair bulbs by doing so, and you produce subsequent tenderness. Direct your patient to sleep in old drawers, so as to keep the bed clean. Do not use the ointment to the thighs, as is usually recommended; it gets between the thigh and the scrotum, producing eczema; it also dirties the patient's linen, and excites the attention of the washerwoman. Get the patient firmly under its influence, before you discontinue the use of mercury.—Aiton, p. 274.

Toxicology.

Poisons.—Purified Animal Charcoal, an Antidote to all Vegetable and some Mineral Poisons.—This substance may be used as an antidote to opium and its active principles, morphia, &c.; nux vomica and its active principles, strychnia and brucia; henbane, deadly nightshade, bitter-sweet, thorn-apple, tobacco, hemlock, bitter-almonds, prussic acid, the aconites, &c. &c., in fact to all vegetable poisons; to animal, also, cantharides. The *carbo animalis purificatus* of the pharmacopœia should be used, and in the proportion of half an ounce to a grain of morphia, strychnia, &c. It combines with and renders inert vegetable and animal substances, and absorbs some mineral poisons, especially arsenic, and renders them harmless, and exerts no injurious effects on the body.

It should be rubbed in lukewarm water, so as to form a fluid of slight consistency, and thus given in quantities of from one to four ounces. Emetics also should be given; ipecacuanha, however, will not do, as the charcoal renders it inert. Give sulphate of

zinc in scruple or half drachm doses, or use the stomach pump, and then give more of the charcoal.

Might not this substance be tried to prevent the injurious effects of animal poisons, such as rabies, syphilis. poison of serpents, &c., applied in the form of poultice to the parts ?—Dr. Garrod. p. 142.

Prussic Acid, Poisoning by.—Dash cold water on the patient; apply ammonia to the nostrils, and heat to the spine and feet; give an injection containing tincture of assafœtida, use friction with a flesh-brush to the skin; and as soon as the jaws become relaxed, and the patient can swallow, give an emetic, and afterwards some weak brandy and water, and strong coffee.—Dr. Gray, p. 145.

Cause the patient to inhale the fumes of ammonia, when he has ceased to be able to swallow.—Mr Hicks, p. 146.

Opium. Poisoning by.—After the stomach has been well evacuated, should the vital energies sink, make use of electro-magnetism; pass the current through different parts of the body, and gradually increase its power until it reaches its maximum intensity. Continue its use for a considerable period, until sensibility is not only evident but complete.—Mr. Colahan, p. 154.

Materia Medica and General Therapeutics.

AQUÆ COPAIBÆ VEL CUBEÆ.—1. Ol. copaibæ. or cubebs, two ounces; water, five gallons and a half: draw over from three to four gallons. 2. Oil of copaibæ, or cubebs, two ounces; magnesia carb. six drachms; rub together, and add four gallons or less of water; filter.

Saccharised Caustic Solution of the Oils of Copaiba or Cubebs.—Oil of copaibæ, or cubebs, one drachm; caustic potash or soda, half an ounce; white sugar, six drachms. Twenty-four ounces of water to be added gradually.

Saponiform Solution of these Oils.—Oil of copaibæ or cubebs, two ounces caustic solution of potash or soda, one ounce. Rub together in a mortar, and add water as may be required.

These forms are not attended with the gastric and nephritic irritation usually met with while administering copaiabæ or cubebs.—Dr. Cattell. p. 294.

BROMINE, a substitute for iodine.—Where it is wished to substitute bromine for the tincture of iodine, use bromine one part, distilled water forty parts, and give from five to six drops in some aqueous vehicle three or four times daily; for external use, make the solution, four times as strong as this.

Bromide of Potassium.—Dose from four to eight grains three times a day; for an ointment, rub four parts with thirty-two parts of lard.

Bromide of Barium.—Dose from one to five grains three times a day.

Bromide of Calcium.—Dose from three to ten grains in a pill with conserve of roses.

Bromide of Iron.—Dose from one to three grains in a pill, with conserve of roses and gum arabic.—p. 172.

DIGITALINE.—This substance may be given whenever digitalis is indicated; its advantage is, that it can always be exactly known what quantity of active principle is being employed.—p. 173.

STRAMONIUM CIGARS are said to be a good remedy for asthma. p. 174.

AMPUTATION at the Middle of the Leg.—The mortality attending the operation performed just below the knee, is much greater than that lower down; it is also much more painful and not so easily performed; whilst in the latter case there is insured to the patient the use of the knee-joint. The two best methods of amputating the leg below the knee, are by the double circular and anterior and posterior flap operation. In doing either, take care to leave sufficient muscle to cover the bones; and in the latter operation, the anterior flap, composed entirely of skin, should be at least half a diameter in length, and the projecting ridge of the tibia should be pretty deeply sawn off in a slanting direction. The middle of the leg or just below it, is the best point at which the bones can be sawn.—Dr. Lawrie. p. 202.

Venous Hemorrhage during Amputation.—Apply a bandage from the extremity of the limb nearly to the point at which it is to be amputated; it must be appli-

ed carefully and exactly, and with all bearable firmness.—Dr. Hannay, p. 205.

Circular Amputation.—Let an assistant dissect back the skin on one side, whilst the operator does the same on the other; this shortens materially the most painful and unseemly part of the operation.—Dr. Hannay, p. 206.

Sutures after Amputation.—If the parts will not meet without dragging or putting on the stretch, do not use sutures, and never pass them through the muscular structure.—Dr. Hannay, p. 206.

First Dressing after Amputation.—Give thirty or forty minims of laudanum before the first dressing after amputation, particularly of a large extremity; it alleviates the shock which the nervous system is sure to receive; give it half an hour before the dressing.—Dr. Hannay, p. 206.

ULCER.—To an irritable ulcer apply oxide of silver in the form of ointment of powder.—Mr. Butler Lane, p. 103.

SORE NIPPLES.—Apply ung. argenti oxidi, 3i. to the ounce.—Mr. Butler Lane, p. 103.

TOOTHACHE: New remedy for.—Cold saturated solution of camphor in æther, to which a few drops of liquor ammonia are added.—M. Cottereau, p. 324.

Caries of the Teeth.—Scrape out the entire of the softened carious part, and rub its interior with a saturated solution of nitrate of silver, or with pulverised nitrate made wet. p. 197.

PNEUMONIA.—The treatment consists of 1st. Subduing inflammatory action by moderate bleeding (sixteen to twenty ounces), at the beginning of the attack, followed by three or four grs. of calomel and one gr. opium, and if crepitant râle persist, repeat the bleeding, and give tartar emetic in full doses, viz., one or one and a half grains every three or four hours, making the interval afterwards six or eight hours. Give the bitter almond emulsion as a sedative, or hydrocyanic acid. 2d. Preventing deposition by exciting the capillaries, by giving hyd. c. creta, gr. iv. vel v., or calomel, gr. j. in each interval of the antimonial, so as to produce a fair constitutional impression short of pyalism. Blister with caution. 3d.

Guard against relapse on well-known principles. (Dr. A. T. Thomson. p. 71.)

APHONIA, Chronic.—Emetics, aperients, mercurials, iodide of potassium, cinchona, and acidulated astringent gargles were given five months unsuccessfully, and it was afterwards cured in three weeks by the inhalation of iodine from a Woulff's bottle for fifteen minutes twice a day, and a sulphate of quinine mixture. (Mr. Monks, p. 132.)

CHOLERA (Asiatic).—To promote healthy secretion, and allay pain, irritation, and spasm. Give calomel and Dover's powder freely, until the vomiting and purging are restrained. (Mr. Clark, p. 83.)

Take thirty grains of sesqui-carbonate of soda or bicarbonate of potash, put into a tumbler glass, and add a wine glass of water and a little syrup. Then dissolve twenty grains of tartaric or citric acid in half a wine glass of water, and let the patient drink it off immediately. Lemon juice may be substituted for the citric acid. The carbonic acid is said to act as an antidote to the poison in the system. (Dr. Par-kin, p. 84.)

First give calomel, rhubarb, aloes, aa. gr. x. ft. bolus; then liq. ammon. m xv., and repeat in half hour doses if rejected. Effervescing draughts, soda water, liq. ammoniæ externally over the chest, abdomen, and upper and lower extremities as a rubefacient, vinegar and water to the head. *Convalescent Treatment.*—A laxative after the second or third day, and tonics for a week afterwards. Use opium cautiously. For the spasms or cramps, stretch the lower extremities, taking hold of heel and toes, and bend the toes and foot towards the patient as he lies, gently and repeatedly. Use also shampooing. (Ollapod, of Madras, p. 86.)

DIARRHŒA.—Try acetate of lead for obstinate and peculiar diarrhœa, accompanying uterine phlebitis and peritonitis. This medicine seems to act by checking the peristaltic action of the intestines, and allaying pain by blunting the *sensibility* of the mucous membrane. (Dr. Smyth, p. 86.)

DYSENTERY.—Battley's solution of secale, one drachm; tinct. of muriate of iron, one drachm;

water, six ounces. Mix, and give a quarter part every four hours. (Mr. Gervis, p. 87.)

GONORRHŒA.—Gonorrhœa has six regions as its seat in the urthra. 1. Balanic, or the portion within and just behind the glans penis. 2. Spongie, or the portion extending from the glans penis to the bulb. 3. Bulbic, or the portion situated about the bulb, and to the membranous portion. 4. Membranic, the whole membranous or muscular portion. 5. Prostatic, or the part involved by the prostate gland. 6. Cystic, when the specific poison affects the bladder.

Destroy its existence as quickly as possible, as there is no fear of stricture, if no phlegmonous inflammation. Take six to twelve copaiba capsules daily, or one to two oz. of cubebs. Use an injection of ten to fifteen grs. arg. nit. aq. distillat. 3j. Do not mix copaiba and cubebs in one preparation, or give them together.

1. Where there is active inflammation, use active antiphlogistic measures, baths, and laxatives, and when subdued as above.

2. Where dysuria, apply leeches in perineo, cool lavements, general baths. If it continue very distressing, use an elastic catheter of moderate size.

3. Open abscesses as early as the matter is well formed.

4. Vesical tenusmus; inject per rectum aq. 3iv., tinct. opii. 20 v. 30 drops.

5. In commencing gleet, inject ter die aq. dist. 3vij. zinc. sulph. plumb. s. acet. aa. wj.

6. In chronic gleet, if no particular thickening or stricture, use wine, tannin, alum, or iodide of iron (aq. dist. 3viii. iod. ferri gr. ij. ad. iv.), injections.

Injections with copaiba or cubebs are generally useless.

7. Epididymitis, or inflammation of epididymis, use a suspensory bandage. N. B. Be careful not to confound orchitis with epididymitis. (M. Ricord, p. 213.)

PUERPERAL FEVER.—Endeavor to throw off the morbid specific matter, and sustain the powers of life: give diaphoretics and stimulants according to the stage of the disease. Adopt every precaution

against propagation; cease to attend midwifery at the same time with cases of malignant or severe erysipelas; observe rigid ablution of the hands, either with simple water, or chlorinated; change garments, or expose them to a free atmosphere or high temperature, or absent yourself so as to obtain an entire purification, at the same time using warm baths and other alterative and purifying means. (Dr. Peddle, p. 43.)

APPENDIX.

Dr. Ure's Galvanic Experiments.

"A middle-sized, athletic, and extremely muscular man, about thirty years of age, was the subject of the following highly interesting experiments. He was suspended from the gallows nearly an hour, and made no convulsive struggle after he dropped; while a thief, executed along with him, was violently agitated for a considerable time. He was brought to the anatomical theatre of our university in about ten minutes after he was cut down. His face had a perfectly natural aspect, being neither livid nor tumefied; and there was no dislocation of his neck.

"Dr. Jeffray, the distinguished professor of anatomy, having on the preceding day requested me (says Dr. Ure,) to perform the galvanic experiments, I sent to his theatre, with this view, next morning, my *minor* voltaic battery, consisting of 270 pairs of four inch plates, with wires of communication, and pointed metallic rods with insulating handles, for the more commodious application of the electric power. About five minutes before the police officers arrived with the body, the battery was charged with a dilute nitro-sulphuric acid, which speedily brought it into a state of intense action. The dissections were skillfully executed by Mr. Marshall, under the superintendence of the professor.

"*Exp. 1.* A large incision was made into the nape of the neck, close below the *occiput*. The posterior half of the *atlas vertebra* was then removed by bone forceps, when the spinal marrow was brought into view. A profuse flow of liquid blood gushed from the wound, inundating the floor. A considerable in-

cision was at the same time made in the left hip, through the great gluteal muscle, so as to bring the sciatic nerve into sight; and a small cut was made in the heel. From neither of these did any blood flow. The pointed rod connected with one end of the battery, was now placed in contact with the spinal marrow, while the other rod was applied to the sciatic nerve. Every muscle of the body was immediately agitated with convulsive movements, resembling a violent shuddering from cold. The left side was most powerfully convulsed at each renewal of the electric contact. On moving the second rod from the hip to the heel, the knee being previously bent, the leg was thrown out with such violence as nearly to overturn one of the assistants, who in vain attempted to prevent its extension.

"*Exp. 2.* The left phrenic nerve was now laid bare at the outer edge of the *sterno-thyroideus* muscle, from three to four inches above the clavicle; the cutaneous incision having been made by the side of the *sterno-cleido mastoideus*. Since this nerve is distributed to the diaphragm, and since it communicates with the heart through the eighth pair, it was expected, by transmitting the galvanic power along with it, that the respiratory process would be renewed. Accordingly, a small incision having been made under the cartilage of the seventh rib, the point of the one insulating rod was brought into contact with the great head of the diaphragm, while the other point was applied to the phrenic nerve in the neck. This muscle, the main agent of respiration, was instantly contracted, but with less force than was expected. Satisfied, from ample experience on the living body, that more powerful effects can be produced in galvanic excitation, by leaving the extreme communicating rods in close contact with the parts to be operated on, while the electric chain or circuit is completed by running the end of the wires along the top of the plates in the last trough of either pole, the other wire being steadily immersed in the last cell of the opposite pole, I had immediate recourse to this method. The success of it was truly wonderful. Full, nay, laborious, breathing instantly commenced. The

chest heaved, and fell ; the belly was protruded, and again collapsed, with the relaxing and retiring diaphragm. This process was continued, without interruption, as long as I continued the electric discharges.

" In the judgment of many scientific gentlemen who witnessed the scene, this respiratory experiment was perhaps the most striking ever made with a philosophical apparatus. Let it also be remembered, that for full half an hour before this period, the body had been well nigh drained of its blood, and the spinal marrow severely lacerated. No pulsation could be perceived meanwhile at the heart or wrist ; but it may be supposed, that but for the evacuation of the blood—the essential stimulus of that organ—this phenomenon might also have occurred.

" *Exp. 3.* The supra-orbital nerve was laid bare in the forehead, as it issues through the supra-ciliary *foramen*, in the eyebrow : the one conducting rod being applied to it, and the other to the heel, most extraordinary grimaces were exhibited every time that the electric discharges were made, by running the wire in my hand along the edges of the last trough, from the 220th to the 270th pair of plates : thus fifty shocks, each greater than the preceding one, were given in two seconds. Every muscle in his countenance was simultaneously thrown into fearful action ; rage, horror, despair, anguish, and ghastly smiles, united their hideous expression in the murderer's face, surpassing far the wildest representations of a Fuseli or a Kean. At this period several of the spectators were forced to leave the apartment from terror or sickness, and one gentleman fainted.

" *Exp. 4.* The last galvanic experiment consisted in transmitting the electric power from the spinal marrow to the ulnar nerve, as it passes by the internal condyle at the elbow : the fingers now moved nimbly, like those of a violin performer ; an assistant, who tried to close the fist, found the hand to open forcibly, in spite of his efforts. When the one rod was applied to a slight incision in the tip of the forefinger, the fist being previously clenched, the finger extended instantly ; and from the convulsive

agitation of the arm, he seemed to point to the different spectators, some of whom thought he had come to life."

Matteucci's Experiments.

"*Animal Electricity*.—The highly interesting electro-physiological researches of Professor Matteucci, of Pisa, have recently excited considerable attention; the following are the chief facts established by his experiments:—* 1st, Muscle is a better conductor of electricity than nerve, and nerve conducts better than brain; the conducting power of muscle may be taken as four times greater than that of brain or nerve.

2d. In the muscles of living animals, as well as of those recently killed, an electric current exists, which is directed from the interior of each muscle to its surface. The duration of this muscular current corresponds with that of contractility: in cold-blooded animals, therefore, it is greatest; in mammalia and birds it is very brief. Temperature has a considerable influence on the intensity of the current, a small amount of electricity being developed in a cold medium, a larger one when the medium is moderately warm. Any circumstances which enfeeble the frogs (the animals experimented on), and derange their general nutrition, will diminish the power of the muscles to generate electricity, as they also impair the contractile force. The muscular current appears to be quite independent of the nervous system. It is uninfluenced by narcotic poisons in moderate doses, but is destroyed by large doses, such as kill the animal. The development of this muscular current seems evidently to depend on the chemical action constantly taking place as an effect of the changes accompanying nutrition; these organic changes, in short, give rise to an electric current, just as do the chemical changes attending the mutual reaction of inorganic materials, such as the reaction between a plate of metal, and an acidulated fluid in the ordinary

* *Med. Chir. Rev.*, April, 1845.

voltaic pile. That considerable chemical changes attend the process of nutrition in muscle, seems evident when we consider the constant supply and waste of material of which it is the seat, and the evolution of sensible heat which accompanies its contraction ; in this way the generation of electricity can be readily accounted for ; the muscular fibre represents the metal acted on in the arrangement of the voltaic apparatus, and the arterial blood corresponds to the acidulated fluid. The surface of the muscle, which is more or less tendinous, and therefore different in structure and in function from the interior, represents the second plate of metal used in the voltaic apparatus, which does not suffer chemical action, but which only serves to form the circuit. The direction of the muscular current, therefore, from the interior to the surface of the muscle is just such as might be expected, supposing it to be due to a chemical action taking place in the interior of the muscle.

“3d. Another result obtained by M. Matteucci, is the proof of the existence in frogs of an electric current, distinct from the muscular current ; it proceeds from the feet to the head, and is peculiar to the Batrachian reptiles.

“4th. Some curious results were obtained by applying electricity in various ways upon nerves. Upon making some experiments on the sciatic nerves of rabbits, he found that upon *closing* the circuit of the *direct* electric current, or the current directed from the brain to the nerves, contractions in the muscles of the posterior limbs were produced, whilst upon *opening* this circuit marked signs of pain, with contraction of the muscles of the back, and feeble contractions of the posterior limbs, were caused. Upon *closing* the circuit of the *inverse* current, or that directed from the nerves to the brain, signs of pain, contractions of the muscles of the back, and feeble ones of the posterior limbs, were produced ; upon *opening* it, contractions of the posterior limbs were caused.

“It will not be misplaced to notice here the marked analogy between the actions of the electrical organ of the torpedo and those of muscular fibre, which

Matteucci's interesting experiments illustrate. Both are organized to act in a particular way ; the one to develop electricity without any visible change in itself ; the other to contract, with a demonstrable evolution of both heat and electricity. Both will manifest their peculiar phenomena by direct irritation, or by indirect irritation through the nerves. Both are brought under the control of the will by the nerves ; the section of which paralyses the influence of the will over both, but does not destroy the peculiar power of either. In the electrical fish, irritation of the electrical lobe of the brain is capable of exciting a discharge of the organ, just as irritation of a segment of the spinal cord causes contraction of the muscles supplied by it. A current of electricity transmitted through the electrical organ or its nerves, causes discharge ; and a similar current sent through a muscle or its nerves, causes it to contract. All the circumstances which modify the nutrition of muscle, will similarly affect that of the electrical organ."

Dr. Philip's Experiments.

The influence of magnetism on animals in augmenting the force of the contractions and expansions of the muscles, and in altering the morbid and establishing the natural secretion, has been proved by a great number of facts. The experiments of Dr. Philip are so well known to the medical and philosophical world, that it is almost an act of supererogation to repeat them ; but as this little work is intended for all classes of readers, we deem it advisable to introduce an abstract of them. Dr. Philip "found that the secretion of the gastric juice in the stomach, which had been suspended by the division of the 8th pair of nerves, was restored on establishing the voltaic current of electricity through the divided portion of the nerves next to the stomach. The accuracy of the experiments on which this conclusion is founded, was for a long time disputed ; but it has been lately satisfactorily established, by their careful repetition at the Royal Institution, by Dr. Philips. in conjunction

with Mr. Brodie. Dr. Philip appears also to have succeeded in showing, that when the lungs and muscles are deprived of their proportion of the nervous influence, so that their functions are impeded, and the breathing has become difficult and laborious, increased facility is obtained in carrying on these movements by the stimulus of the galvanic power.

"It appears, then, from these facts, that the galvanic energy is capable of supplying the place of the nervous influence; so that, by means of its assistance, the stomach, otherwise inactive, digests its food as usual, and the muscular apparatus of the lungs are roused from a state of comparative torpor to one of healthy action." Dr. Philip, indeed, contends "that the inferences deducible from these experiments, establish the identity of galvanism, electricity, and nervous influence."

M. Donnie's Experiments.

Extracts.

1. The whole of the tegumentary surface secretes an acid humor.

2. The alimentary canal, from the mouth to the anus, except the stomach, secretes an alkaline mucus.

3. The mucous and synovial membranes secrete an alkaline fluid.

4. The external acid, and internal alkaline membranes of the body, represent the two poles of a galvanic pile, whose effects are appreciable by a galvanometer. For, if one of the conductors of this instrument be placed in contact with the mucous membrane of the mouth, and the other conductor be applied to the skin, the magnetic needle will be found to show a deviation of 15 to 20, or even 30 degrees; and the direction of the needle proves that the mucous or alkaline membrane indicates a negative electricity, and the cutaneous or acid membrane a positive electricity.

5. The acid humors of the system may become alkaline, and the alkaline may become acid, in a state of disease.



If figures of men and women are cut out of paper, and placed between two suspended metallic plates, charged with electricity, or electro-magnetism, they will exhibit a *rapid dance*, as seen in the figure.

These evidences are perfectly conclusive in regard to the identity of the magnetic forces with those that produce sensation, inclination, and motion in man and other animals, which with a great variety of other evidences, afford interesting and beautiful illustrations of the action of the hitherto undefined and apparently undefinable nervous fluid, spirit or vital principle of physiologists.

337
PHRENOLOGY.



- | | |
|-----------------------|---------------------------|
| 1. Individuality | 23. Marvelousness |
| 2. Form. | 24. Imitation. |
| 3. Language. | 25. Suavity. |
| 4. Size. | 26. Penetration. |
| 5. Weight. | 27. Benevolence. |
| 6. Color. | 28. Veneration. |
| 7. Order. | 29. Firmness. |
| 8. Calculation. | 30. Self Esteem. |
| 9. Thirstiness. | 31. Concentrativeness. |
| 10. Alimentiveness. | 32. Inhabitiveness. |
| 11. Acquisitiveness. | 33. Philoprogenitiveness. |
| 12. Constructiveness. | 34. Amativeness. |
| 13. Tune. | 35. Voluntary Motion. |
| 14. Time. | 36. Combativeness. |
| 15. Locality. | 37. Connubial Love. |
| 16. Eventuality. | 38. Adhesiveness. |
| 17. Comparison. | 39. Ostentation. |
| 18. Causality. | 40. Approbativeness. |
| 19. Mirthfulness. | 41. Conscientiousness. |
| 20. Ideality. | 42. Cautiousness. |
| 21. Sublimity | 43. Secretiveness. |
| 22. Hope. | 44. Destructiveness. |



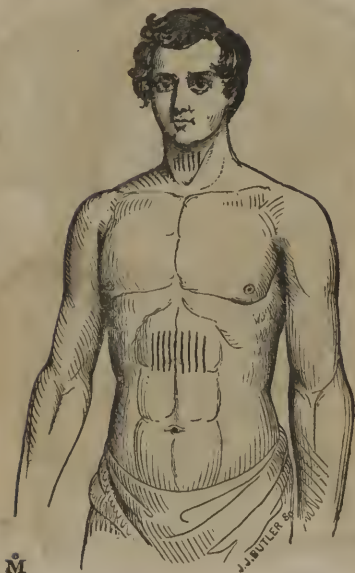


C. Cerebrum. D. Cerebellum. E. Destructiveness. F. Causality. G. Comparison. H. Medulla Oblongata.

e Cerebellum, and its connection with the Brain,
or Cerebrum.

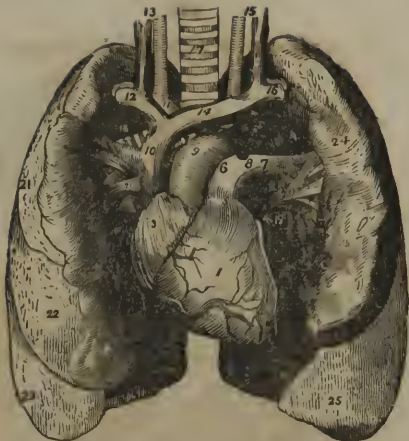


- AA, The cerebellum.
B, Processus vermiculares—organ of motion.
a a, The posterior corpora quadrigemina.
c c, The anterior corpora quadrigemina.
d d, The great inferior ganglia. e Pineal gland
m m, Posterior part of the great superior ganglia.

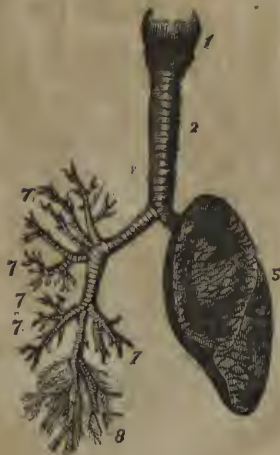
Bilious, Congestive, and Yellow Fever.



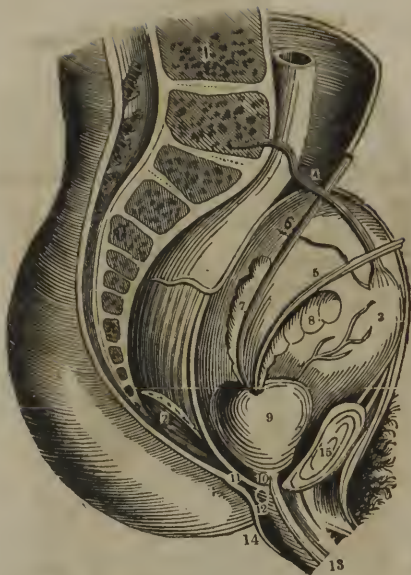
V, Vena cava descendens. R L, right lung. L L left lung. H, heart. D, diaphragm. Livr., liver. Stm. stomach. C, colon, or large intestine, extending along each side, and across below the stomach, as seen in the figure. S, spleen, 1, 1, 1, small intestines



1. The right ventricle ; the vessels to the right of the figure are the middle coronary artery and veins ; and those to its left, the anterior coronary artery and veins. 2. The left ventricle. 3. The right auricle. 4. The left auricle. 5. The pulmonary artery. 6. The right pulmonary artery. 7. The left pulmonary artery. 8. The remains of the ductus arteriosus. 9. The arch of the aorta. 10. The superior vena cava. 11. The right arteria innominata, and in front of it the vena innominata. 12. The right subclavian vein, and behind it its corresponding artery. 13. The right common carotid artery and vein. 14. The left vena innominata. 15. The left carotid artery and vein. 16. The left subclavian vein and artery. 17. The trachea. 18. The right bronchus. 19. The left bronchus. 20, 20, The pulmonary veins ; 18, 20, form the root of the right lung ; and 7, 19, 20, the root of the left. 21. The superior lobe of the right lung. 22. Its middle lobe. 23. Its inferior lobe. 24. The superior lobe of the left lung. 25 Its inferior lobe

Lungs and Bronchial Tubes.

1.—Larynx. 2.—Trachea or wind pipe.—
 5.—Left lung. 7.—Large Bronchial or air
 tubes of right lung. 8.—Minute tubes, or
 continuation of the large ones, which termi-
 nate in air cells.



GENITAL ORGANS.—Pelvis divided in the median line, and laid open from the right side.

1. Vertebral column.—2. Termination of the large intestine.—3. Bladder.—4. Ureter.—5 and 6. Vasa deferentia.—7. One of the vesiculæ seminales, opening into the vas deferens to form, 8. The ductus ejaculatorius communis.—9. Prostate.—10. Membranous portion of the urethra.—11. Triangular ligament.—12. One of Cowper's glands.—13. Urethra.—14. Bulb of the urethra.—15. Pubis.

PLATE A.



Contents of the Female Chest, Abdomen and Pelvis.

—A. The Heart.—B B. The Lungs.—C. The Liver.
 —D. The Stomach.—E. The Spleen.—a. The Aorta.
 —b. The Vena Cava.—c. The Trachea, or windpipe.
 —f f f. The Colon, or large intestine.—g. The bladder.—h h. The ovaries.—i. The Womb.—j j. The upper part of the small intestines, called the jejunum.—k k. The lower part of the small intestines, called the ileum.—l. The Gall Bladder.—mm. The Carotid Arteries.—*Hollick.*



FIG. 1

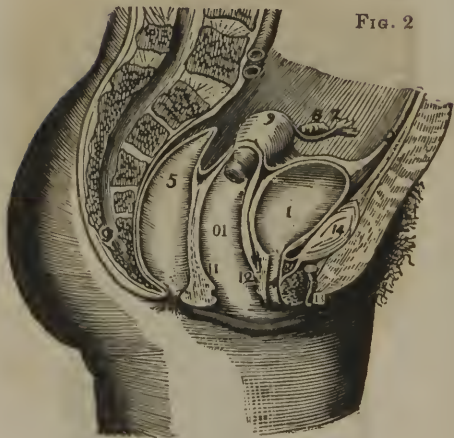


FIG. 2

Fig. 1. THE POSTERIOR HALF OF THE UTERUS AFTER A PERPENDICULAR TRANSVERSE SECTION OF IT HAS BEEN MADE.—1. Cavity of the body of the uterus : it is continuous with, 2. The cavity of the Fallopian tubes, and, 3. The cavity of the neck. In this last cavity there is seen an arborescent projection, called the arbor vitæ of the womb.—Ligament of the ovary.

Fig. 2.—1. Bladder.—2. Urachus.—3. Anterior ligament of the bladder.—4. Urethra.—5. Rectum.—6. Laounæ at the inferior extremity of the rectum.—7. Fallopian tube.—8. Ovary.—9. Uterus : the peritoneum is seen to envelope it, and to pass from thence on the bladder and on the rectum.—10.—Vagina.—11 and 12. Anterior and posterior pillars of the vagina. 13. Clitoris.

FIG. 1

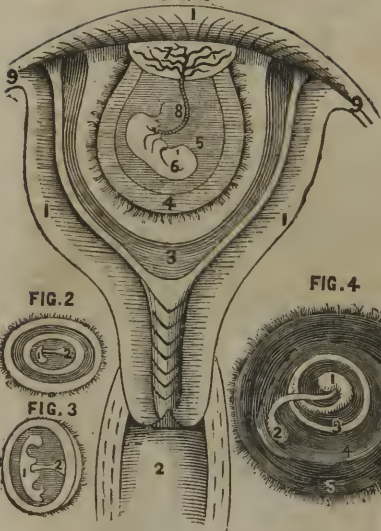


FIG. 2



FIG. 3



FIG. 4

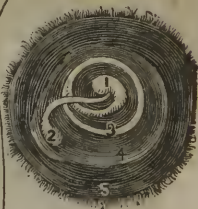


Fig. 1. A Lateral Section of the Uterus, between the second and third month of Pregnancy.

No. 1, 1, 1.—The Walls of the Uterus. No. 2.—The Vagina. No. 3.—The membrane called the *Decidua*, which lines the Cavity of the Uterus from the very commencement of Pregnancy. The decidua is reflected, or doubled, the two folds being connected by the dotted line. No. 4.—The membrane called the *Chorion*, which is seen to be covered with Villousities, or little blood vessels, like hairs. No. 5.—The membrane called the *Amnion*. This contains the fluid called the waters of the Amnion, in which the fœtus seems to swim. No. 6.—The Fœtus. No. 7.—The Placenta, or mass of Blood vessels, which receives the blood from the Uterus; it is seen full of vessels, like roots. No. 8.—The Umbilical cord, or Navel String. One end of this is connected with the Fœtus, and the other with the Placenta. The blood flows down it from the mother to the child. No. 9, 9.—The ends of the Fallopian Tubes, cut off.

Fig. 2. An Ovum of about *twelve days* after impregnation; natural size. No. 1.—The Embryo. 2.—The Vesicle, or Vitellus. The Embryo and Vitellus are seen to be connected by a cord. 3.—The Amnion. 4.—The Chorion.

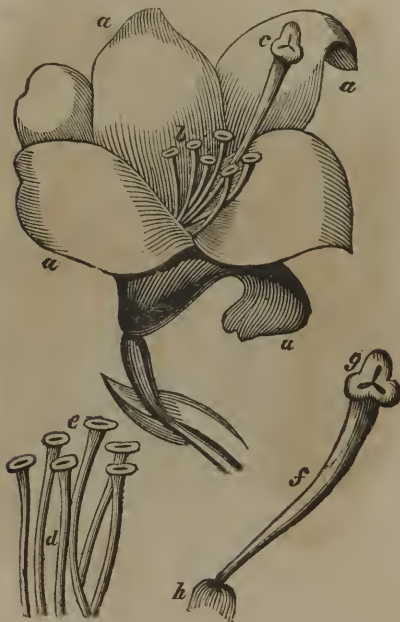
Fig. 3.—An Ovum of about *twenty days*, natural size. Numbers and references same as for Fig. 2.

Fig. 4.—The Fœtus at about twenty days.—1. The Fœtus.—2. The Vitellus.—3. The Amnion.—4. The Chorion.—5. The Decidua.—6. The Umbilical cord.

—*Hollick*

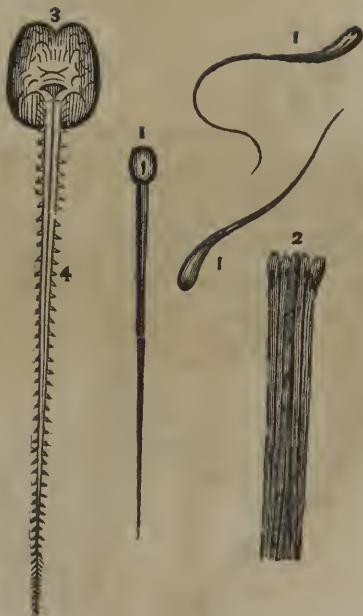
Generative Organs of Plants.

Analysis of the Flower of the White Lily, to show the Organs of Generation in a plant.



a, a.—The Petals, or colored Leaves. *b.*—The Stamens, or male Organs. *c.*—The Pistil, or female Organ. *d.*—The filaments, or threads of the Stamens. *e.*—The Anthers, or heads of the Stamens. *f.*—The Stile, or Thread of the Pistil. *g.*—The Stigma, or head of the Pistil. *h.*—The Germ, or rudiments of the seeds, answering to the Ovary in an Animal.

The Pollen (or semen), is formed on the Anthers ; is shed on to the Stigma, and passes down the stile (or Fallopian Tube), and so reaches the Germ (or Ovary).—*Hollick.*



Seminal Animalculæ.

This plate exhibits the form of the Seminal Animalcule ; and also its resemblance to that of the Brain and Spinal Marrow, to illustrate the Neuro Spermatic Theory of Generation.

No. 1, 1, 1.—Magnified views of the Seminal Animalculæ, enlarged many thousand times. No. 2.—The same in bunches, as they are usually seen. No. 3.—The Brain. No. 4.—The Spinal Marrow proceeding from the Brain, with the nerves branching from it cut off.

The resemblance between the Brain and Spinal Marrow, and one of the Seminal Animalcules, will be seen at once by comparing them together as they are placed side by side. —*Hollick*



ARTERIES.

The Nerves
accompany the
Arteries in eve-
ry part of the
system.



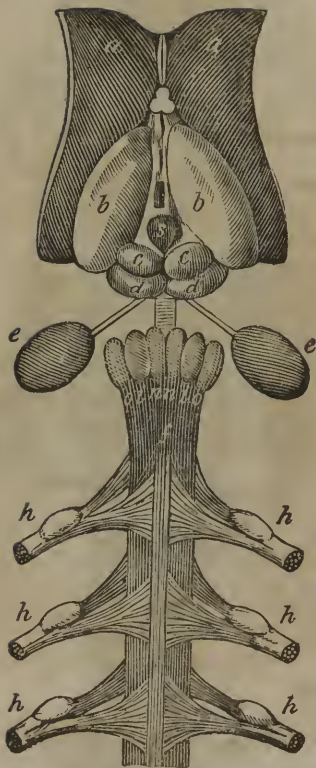
A.....

Cerebrum.

B.....

Cerebellum.

Posterior Spinal
nerves.



GANGLIONIC SYSTEM OF PHRENIC LIFE.

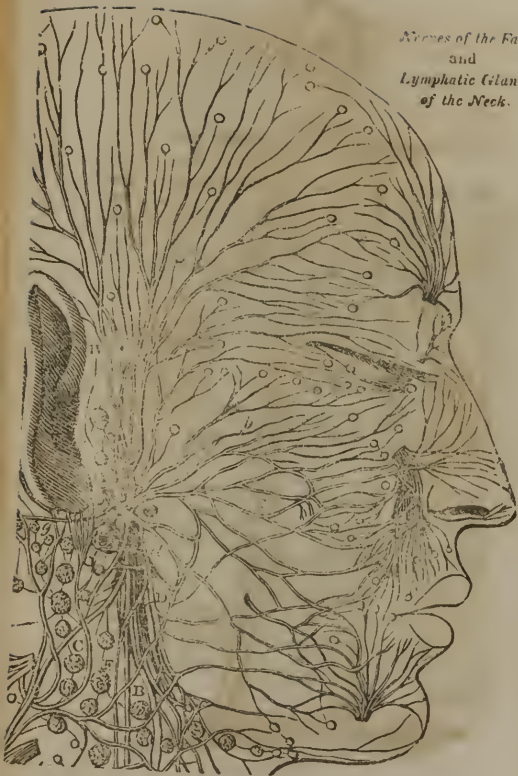
The figure on the opposite page is intended to show at one view the situation and comparative size of the ganglions of the brain, cerebellum, medulla oblongata, and spinal nerves.

- a a*, Great superior ganglions—color, reddish grey.
- b b*, Great inferior ganglions—color, bluish white.
- c c*, Cerebellar ganglions—color, bluish white.
- i i*, Olivary ganglions—color, bluish white.
- h h h*, Ganglions of spinal nerves.
- n n*, Pyramidal bodies—color, bluish white
- o o*, Restiform bodies—color, bluish white.
- d d*, Posterior quadrigeminal bodies — color, bluish white.
- c c*, Anterior quadrigeminal bodies—color, bluish white.
- s*, Pineal gland—color, reddish grey.
- f*, Medulla oblongata—color, bluish white.
- u*, Spinal cord—color, bluish white.

MAGNETIZED MEDICINES.

It is now more than thirty years since we first commenced magnetizing medicines, and we have published during the last ten years more than 25,000 copies of different works in which we have noticed this subject. It has, however, not only been denied, but the idea of magnetizing medicine treated with derision by the professors of our medical colleges and their satellites. Baron Von Reichenbach, of Vienna, has, however, recently succeeded in magnetizing medicines, to the full satisfaction of Berzelius of Stockholm, and of Dr. Gregory of Edinburgh. Hahnemann first succeeded in doing so in Germany

*Nerves of the Face,
and
Lymphatic Glands
of the Neck.*





THE ANATOMY OF MAN'S BODY,
As governed by the twelve constellations, according to ancient Astrology.

♈ Head and Face. ♊ Arms. ♎ Heart.
♊ Neck. ♋ Breast. ♏ Bowels. ♍ Secrets.
♐ Reins. ♑ Thighs. ♒ Legs.
♊ Knees. ♋ Feet.



To know where the sign is, first find the day of the month in the Almanac, and against the day in the third column you have the sign, or place in the moon; then find the sign; and it will give you the part of the body it is supposed to govern.

FIG. 2.



GLOSSARY.

****** *For words not given here, see Index of Diseases*

- Ablation**, Taking away, abstracting, or cutting off.
Ablution, Washing, cleansing.
Abnormal, Irregular, unnatural, singular, misshaped.
Absorption, The act of sucking up, attracting, or collecting, as with a sponge.
Absorbents, Vessels taking up and conveying the lacteal and lymphatic fluids.
Abscess, A collection of pus in a cavity, the result of morbid process.
Accessories, Helping, additional, two nerves running from the medulla oblongata.
Acetate of Lead, A combination of acetic acid, or vinegar, with lead.
Acini, Minute kernels, tubercula, or glandiform corpuscles.
Acoustic Nerve, Belonging to the ear, hearing, or sound.
Adipose, Fatty, containing fat.
Alkaline, Having the quality of an alkali, or fixed salt, caustic.
Anastomatic, Quality of removing obstruction, deobstruent.
Anaphrodisia, Absence of venery, impotence, sterility.
Anastomose, To join two vessels, union of parts or currents.
Aneurism, A tumor, formed by the dilatation or lesion of an artery.
Angina, Quinzy, or sore throat.
Antiphlogistic, Opposed to inflammation; depleting.
Antrum, Cavities in bones, the entrance to which is smaller than the bottom.
Aorta, The great artery arising out of the left ventricle of the heart.

- Arachnoid**, Inner membrane covering the brain.
- Asphyxia**, Suspended animation or motions of the heart, swooning or fainting.
- Asthenic**, Relating to a debility of the vital forces.
- Ataxic**, Pertaining to disorders characterizing nervous fevers.
- Atony**, Want of tone or force, general debility.
- Atrophia**, Marasmus—wasting of the body.
- Auscultation**, To listen, to learn by sound through the stethoscope or otherwise, the diagnosis of diseases in the heart and lungs.
- Automatic**, Mechanical, like or belonging to an automaton.
- Auditory**, Relating to the ear.
- Auricles**, Right and left auricular cavities of the heart.
- Axillary**, Belonging to the armpit.
- Bronchia**, The tubes arising from the throat, or trachæa, and conveying air into the lungs.
- Bronchitis**, Mucosis of the lining membrane of the bronchial tubes.
- Bronchophony**, Guttural sound of words in the lungs, like that in the character of Punch.
- Calamus Scriptorius**, A furrow or canal in the fourth ventricle of the brain.
- Calx**, Lime, preparations of lime used medicinally.
- Cardiac**, Relating to the heart or upper orifice of the stomach.
- Carnivorous**, Feeding or living on flesh.
- Caries**, Ulcerations of the bones.
- Catarrhal**, Relating to a discharge from a mucous membrane.
- Catamenia**, The menses.
- Catenation**, A link, a regular connection.
- Catholicons**, General remedies, panaceas.
- Catheter**, A tube or instrument introduced through the urinary passage into the bladder.
- Cautery**, A burning iron, a caustic.
- Cellular**, Consisting of cells or cavities, tissues of the body.
- Cellulosity**, State of having cells.
- Cerebellec**, Belonging to the cerebellum.
- Cerebelli**, The two hemispheres of the cerebellum.

- Cerebellum**, The small brain, posterior to the cerebrum.
- Cerebral**, Belonging to the brain.
- Cerebrum**, The brain anterior to the cerebellum.
- Cervical**, Belonging to the neck.
- Chloride of Mercury**, A compound, formed by chlorine and mercury.
- Chronic Diseases**, Those of long duration, organic, impeding performance of functions.
- Chyle**, A white fluid produced by digestion and assimilation.
- Cineriterous**, Color of ashes, the part of the brain, &c., of that color.
- Circulatory System**, Circulation of the blood and other fluids of the body.
- Circumflexus Palati**, A muscle of the sphenoid bone.
- Clavicle**, The collar bone.
- Clinical**, Relating to discourse or practice at the bed of the sick.
- Commissure**, A joint of union, seam or bridge.
- Comparative Physiology**, Knowledge or doctrine of functions, derived from study of the lower order of animals.
- Condylloid**, Shape of a condyle, or soft protuberant end of a bone.
- Congestion**, An unnatural accumulation of blood or other fluid in an organ.
- Conglobate**, Formed into balls—lymphatic glands.
- Conjunctiva**, External coat of the eye.
- Contractility**, Power or susceptibility of contraction or shrinking.
- Contractile**, A muscle, having the power of contracting or shortening.
- Convolutions**, Turnings, undulating or tortuous projections, as of the brain, intestines, &c.
- Corpora Restiformia**, Resting bodies, medullary projections from the top of the medulla oblongata.
- Corpora Striata**, Two ganglions in the ventricles of the brain.
- Coronary**, Belonging to the crown or top, as of the head.
- Costal**, Relating to the ribs.
- Corpus Olivare**, Olivary body or ganglion in the medulla oblongata.

Cortical, The exterior skin, rind, bark.

Costive, Bound, retentive, close.

Cranium, The skull.

Crepitus, Pertaining to crackling sounds in breathing, ebullitions of air, or the frictions of bones.

Cribriform, Resembling a sieve or riddle, like the ethmoid bone.

Crura, Bodies resembling legs or roots, as the crura cerebri.

Crypts (*Cryptæ*, pl.), Follicles, cavities, small glands or cells in the membranes.

Cystis, A bag, the urinary bladder.

Decussation, Crossing, intersecting at angles, &c

Degenerescence, A change for the worse in the composition of fluids or solids of the body, or the structure of an organ.

Diagnosis, Discrimination of diseases—"What is the matter?"

Diaphragm, The midriff, a muscular partition dividing the chest from the belly.

Diathesis, Disposition, predisposition to certain diseases

Dorsal, Belonging to the back; the second division of the spine, consisting of twelve vertebræ.

Dorsal Medulla, Marrow of the dorsal vertebræ.

Dual, Two.

Duality, Relating to two.

Duodynamics, Laws relating to the magnetic forces.

Duct, A tube, canal, or passage for fluids.

Duodenum, First small intestine receiving the food from the stomach.

Dyspnoea, Difficulty of breathing.

Electro-dynamic, Laws relating to electrical forces, &c.

Elixirs, Liquid extracts, the essence, a medical cordial.

Ellipticity, Oval, like an egg.

Embryo, A germ, elementary organization, fœtus.

Eczema, A hot, painful eruption.

Encephalic, Belonging to the head or brain.

Erotic, Loving, produced by love.

Ethmoid Bone, Lying horizontally with the eyes and over the nose.

Exacerbation, Increase in the symptoms of disease.

Excrete, To separate, to throw off.

Expectoration, The act of expelling excretions from the chest—the matter expelled.

Extravasated, Forced out of the proper vessel or channel, as with stagnant blood.

Fascia, A membrane covering the muscles.

Femoral, Relating or belonging to the thigh.

Fibrillæ, Small fibres.

Flexor and Extensor muscles, the offices of which are to extend and contract.

Flocculi, Flakes, like snow, leaf like.

Fœtal, Relating to the fœtus, or child in the womb.

Follicles, Little excreting glands, bags, or folds, in mucous membranes.

Foramen (Foramina, pl.), A hole or opening.

Foramen Magnum, A large hole or opening at the base of the brain, through which the spinal marrow enters the brain.

Foramen Lacerum, A hole in the os phenoides.

Formulæ, Forms of medicinal preparations or prescriptions.

Fornix, A medullary body in the brain.

Fossa (Fossæ, pl.), A groove or ditch.

Frontal, Belonging to the front, or forehead.

Fungus (Fungi, pl.), A spongy excrescence.

Ganglions, Organs formed of agglomerated globules in the brain—the posterior spinal nerves, and along the course of the sympathetic nerves.

Gangrenous, Mortification, partial death or disorganization of any organ or limb.

Gestation, The act or period of carrying young.

Gibbosity, Curvature of the spine; relating to rickets and caries of the vertebræ.

Glands, Organized bodies, situated internally and externally, to secrete fluids or modify those of others.

Glandular, Of the form or texture of glands.

Globate, Like a globe.

Glottis, The opening of the windpipe or larynx, serving in the formation of the voice.

Glossopharyngeal, Belonging to the tongue and pharynx.

Hectic, Fever, preternatural irritability, febrile excitement, with emaciation.

Homogeneous, Of the same nature; similarity of parts.

- Hydriodates**, Salts consisting of the hydriodic acid combined with an oxide.
- Hydrocephalic**, Relating to dropsy, or water on the brain.
- Hyoideal**, Relating to the os hyoides.
- Hypertrophy**, The state of a part in which nutrition is performed with great or unnatural activity, swelling.
- Innervation**, Weakness, relaxation of the nervous power.
- Increments**, Increases, additions, or productions.
- Inosculate**, Inter-union of the extremities of arteries, veins, &c. ; to unite by contact.
- Infinitesimal**, Indefinitely small quantities.
- Intercerebral**, Between the hemispheres or parts of the brain.
- Intercostal**, Between the ribs.
- Integument**, The skin, an envelope, bark, a covering.
- Intermembranous**, Between the membranes.
- Inguinal**, Relating or belonging to the groin.
- Involuntary Muscles**, Those performing their functions without the aid of the will.
- Iodine**, A violet-colored liquid, obtained by burning a marine plant, and the ashes with sulphuric acid.
- Iris**, The variegated circle surrounding the pupil of the eye.
- Laminæ**, Thin plates or layers.
- Laryngeal**, Relating to the larynx.
- Larynx**, Upper part of the trachea or windpipe.
- Leyden Jar**, A glass vessel, covered with tin foil, for electrical purposes.
- Ligamenta Dentata**, A small ligament supporting the spinal marrow.
- Ligament**, An elastic and strong membrane, connecting moveable bones, &c.
- Lobes**, Round projecting parts or divisions of organs, as of the brain, lungs, &c.
- Locus Niger**, Dark-colored cells or spots.
- Longus Colli**, A flexor muscle of the neck.
- Lumbar**, Relating to the loins—five vertebræ of the third division of the spine.
- Lymph**, A clear fluid, found in the lymphatic vessels, mixing with the chyle and blood.
- Lymphatic Tubes**, Small vessels of the body, containing & carrying lymph.

Magnetism, The two innate forces in every kind of matter, and which, in their organized state, produce motion everywhere and in everything.

Maligna, Malignant.

Mammalia, Animals which suckle their young.

Mammary, Pertaining to the breasts.

Manipulator, One practising by manual operations.

Marasmus, Chronic mucosis, a wasting disease, emaciation.

Masseter, A strong muscle, closing the jaw in chewing.

Matity, Relating to sounds afforded by the percussion of the chest.

Maxillary, Pertaining to the jaw bones.

Maximum and Minimum, The greatest and least—indicating the greatest and least number, quantity, or power in any case.

Median, The middle line.

Mediastinum, The fold of the membrane separating the chest into two parts.

Medulla, The marrow.

Medulla Oblongata, The union of the parts of the brain to form the spinal marrow.

Medulla Spinalis, The spinal marrow.

Membrane, A thin, expanded substance, composed of elastic fibres, interwoven like net-work, covering and lining the organs of the body.

Mercury, Quicksilver—a preparation of mercury by volatilization.

Mesmerism, Animal magnetism.

Mesenteric, Relating to the mesentery

Mesentery, A double fold of the membrane lining the abdomen and covering the intestines.

Meteorologico-Medical, Diseases depending on the atmosphere or the weather.

Microscopic, Seen only by the microscope—an instrument for magnifying minute objects.

Molecular, Small, diminutive, elementary parts.

Motor, Moving, prompting, or acting.

"Mouvements d'ensemble," Combined movements.

Moxa, An application of cotton, wool, or other substance, which is burned on the part intended to be cauterized.

- Mucous Membranes**, Linings of the organs and inner surfaces of serous membranes.
- Mucosis**, Disease of the mucous membranes.
- Muco-serous**, Partaking of the quality of mucus and serum, or of the mucous and serous membranes.
- Mucous**, Of the nature of mucus.
- Mucous Rale**, Rattle or sounds produced by the air in breathing, passing through mucus.
- Mucus**, A mucilage, a glutinous thready semi-transparent fluid, of a salt savor, excreted by the mucous membranes.
- Muriate**, A salt formed by the combination of muriatic acid and a base, as soda, or any of the earths or metals.
- Muscles**, Regular structure or fleshy bodies, composed of fibres, and adapted to distinct functions in all the varied motions of life.
- Naso Palatine**, Relating to the nose and palate.
- Nephralgia**, Pain or disease in the kidneys—belonging to the kidneys.
- Nerves**, Cords composed of filaments, conveying sensation, motion, and will, to and from the brain.
- Nervous filament**, A thread or fibre of a nerve.
- Nitrate**, A salt formed of nitric acid and an earth or a metal.
- Normal**, Natural, by rule, upright.
- Nosologists**, Those skilled in the classification of diseases.
- Nurilema**, The investing sheath of the nerves.
- Nutation**, Tremulous motion of the earth's axis.
- Nux Vomica**, The vomit nut of India.
- Œdematous**, Relating to a swelling from a serous fluid in the cellular texture.
- Olfactory**, Belonging to the organs of smell—sense of smelling.
- Olivary**, Belonging to the two prominences on the medulla oblongata.
- Ophthalmic**, Relating to the eye.
- Os Coccyx**, The lowest bone of the sacrum.
- Os Sacrum**, The fundamental bone of the spinal column—of pyramidal form, base upward.
- Os Hyoides**, The bone forming the base and support of the tongue.

- Oxyde**, A rust or substance, formed by the combination of oxygen and a metal.
- Panacea**, Universal remedy for human diseases.
- Pancreas**, A large gland, excreting a kind of saliva, and pouring it into the duodenum—the sweet-bread.
- Papillary**, Having emulgent vessels, or resemblances of paps.
- Par Vagus**, Eighth pair of nerves.
- Paralysis**, Palsy, prostration of muscular power.
- Parietal**, The two bones of the lateral and upper parts of the skull.
- Pathology**, The part of medicines relating to diseases, their causes, effects, and peculiarities.
- Patulous**, Of the form of lips, or an extended flower.
- Periphcral**, Of a round form—relating to the circumference.
- Peritoneum**, A scrous membrane lining the abdominal cavity.
- Pericardium**, A membranous sack enveloping the heart.
- Periosteum**, A white fibrous membrane surrounding the bones.
- Pharmacopeiæ**, Medical dispensatory, formulæ of compounding medicines, the rules or book of pharmacy.
- Photographic**, The art of producing impressions on metallic plates by means of the sun's rays.
- Phrenic**, Relating to the mind.
- Phrenologists**, Students and advocates of the physiology of the brain and nervous system as propounded by Gall, Spurzheim, and others, and on which is now based a clear and beautiful system of mental philosophy.
- Physiology**, The science of organic life—the natural constitution and functions of organs, animal and vegetable.
- Pia Mater**, A thin membrane immediately investing the brain.
- Platina**, A greyish white metal, heavier and more durable than gold.
- Plexuses**, Junctions of vessels, nerves or fibres, representing net-work.
- Plenum**, Fulness, fleshy, large.
- Pneumatica**, Pertaining to breathing.
- Pollen**. Vegetable semen or powder.

- Potassa, Potash**—a vegetable alkali.
- Premier Mobile, First cause, principle, or impulse.**
- Premier Moteur, First motive, or impulse to action.**
- Prolapsus Uteri, A falling down of the uterus.**
- Psoas, Two muscles situated on the lumbar and dorsal vertebræ (tender line).**
- Pterygoids, Two processes or wings of the sphenoid bone.**
- Pyramidal, Of the form of a pyramid.**
- Pulmonary Catarrh, Mucosis of the membrane lining the inside of the air tubes of the lungs.**
- Purulent, Matter—pus.**
- Quinine, An alkaline substance, obtained from the cinchonas, valuable bitter barks from South America.**
- Rachitis, Curvature of the spine—the rickets.**
- Rectilinear, Straight, in straight lines.**
- Rectus Externus, Muscle attached to the foramen opticum and the sphenoid bone.**
- Ramollissement, Branching like boughs, small sprigs.**
- Renal, Relating to the kidneys.**
- Restiform Columns, Parts of the brain.**
- Retina, A delicate and sensitive nervous membrane (considered an extension of the optic nerve), on which the images of objects are received.**
- Rodentia, Gnawers—a class of animals which gnaw their food, as the rat, beaver, squirrel, &c.**
- Ruminating, A class of animals which chew the cud—reflection.**
- Sacral, Relating to the sacrum—a bone forming the posterior part of the pelvis.**
- Salacina, The active principle of the willow bark (salix helix). A substitute for quina, in intermittents, &c.**
- Salivatory, Belonging to the glands excreting saliva or spittle.**
- Sanative, Power of healing—healthful.**
- Sanguineous, Relating to or indicating a fulness of blood; tinged with blood.**
- Sarsaparilla, The name of a sudorific plant of little medicinal virtue.**
- Scirrhus, Pertaining to scirrhus—a disease of the glandular structures, and known by its hardness, &c.**

- Sclerotica**, A hard white membrane covering the globe of the eye.
- Scrofula**, A depravation of the humors of the body, chronic swellings, breaking out in sores, &c.
- Secretion**, The process of secreting from the blood, or from one fluid to another, by the lymphatic glands.
- Semiluna**, A semicircular or half-moon shape.
- Semi-paraplegia**, A partial palsy of the lower half of the body, with the rectum and bladder.
- Sensorium Commune**, Centre of sensations—the cerebrum.
- Sensory**, The seat of sensation or of perception.
- Sequestration**, The separation of a diseased or dead part from the living.
- Serous**, Partaking of serum—exudations from serous membranes.
- Serous Membranes**, Integuments or skin of the bones, organs, and body.
- Serosis**, Disease of serous membranes.
- Serum**, A thin and yellowish part of the blood—whey.
- Seton**, An Issue or rowell.
- Spheroidal**, Having the form of an oblong or oblate body.
- Sphenoid Bone**, A wedge-shaped bone at the base of the skull.
- Spheno-palatina**, Muscles of the palate.
- Spinal Marrow**, The medullary substance of the spine.
- Spinal**, Belonging to the back-bone or spine.
- Splanchnic**, Relating to the diseases of the bowels, or to the three cavities of the viscera, the bowels, head and chest.
- Spleen**, The milt, one of the viscera of the body—anger, spite, melancholy.
- Spongioles**, Sponges, substances like sponges.
- Spontaneity**, Voluntariness, willingness.
- Sterility**, Barrenness.
- Sternum**, The breast-bone.
- Stethoscope**, An instrument used for determining by sound the diseases of the chest.
- Sthenic**, Excessive excitement, or excess of strength in organic actions.
- Striated**, Fibrous, channelled, radlated.

Strumons, Serofulous—pertaining to Struma, the king's evil, &c.

Stylo-Glossal, Muscles expanding the tongue.

Submaxillary, Under or below the jaw-bone.

Sulcus, Groove—as at the end of bones and other organs, and in the interstices of the brain.

Sulphate, A salt formed of sulphuric acid and an earth.

Supra and Infra Orbita, Situated above and below the orbits of the eye.

Syphilis, An infectious or poisonous disease, communicated by virus and contact, as in coition.

Sympathetic, Relating to, depending on, sympathy—the action and reaction of one part or organ on another.

Synovial, Pertaining to synovia—a fluid like the white of an egg, exhaled from membranes around the joints.

Tactile, Perceptible to the touch.

Tactual, Relating to touch and tact.

Tegumentary, Belonging to the outer parts—the skin or covering.

Tella Cellulosa, The cellular or adipose membrane.

Temporal, Relating to the temple.

Temperament, The constitution, or the remarkable differences of men, arising from the peculiarities of organization, relations, and constituents.

Temperament, Susceptible or insusceptible to magnetic or mesmeric influence.

Tetanic, Relating to a permanent contraction of the muscles.

Thalamus, The place where a nerve originates—an irregular surface in the ventricles of the brain.

Thalami Optici, Two round bodies in the brain.

Thoracic, Belonging to the chest or breast.

Thyroid, Having the form of a shield—belonging to the

Thoracic, Belonging to the chest or breast. **Larynx.**

Testes, Testicles, two oval bodies in the scrotum.

Tibia, Shin-bone—flute or hantboy.

Tissues, The parts of the body which form the organs—the anatomical elements of the body and of its diseases.

Tonsils, Glands in the throat, almonds of the ear.

Trachea, Windpipe, composed of cartilaginous rings.

Trigemini, The fifth pair of nerves.

Trisplanchnic, Belonging to the three orders of viscera in the three splanchnic cavities—the head, chest, and abdomen.

Tuber, A knob, knot, or little swelling.

Tubercle, An enlarged lymphatic knob, knot, or gland.

Tubercula, Tubercular disease of the lymphatic system; scrofula.

Tubercular, Having knots, knobs, or little swellings.

Tuberculous, Scrofulous.

Tuberculosls, Tuberculous disease.

Tubrcular, Relating to tubercula.

Tubercles, Tumors in the substance of organs.

Tumefied, Of the form and nature of tumor or swelling.

Tympanum, The drum or barrel of the ear.

Typhoid, Relating to typhus, as typhoid or typhus fever.

Uterus, The womb.

Uvula, Pap of the throat, belonging to the palate.

Vascular, Relating to or consisting of vessels—arterial, venous, or lymphatic.

Vagina, the canal or passage from the vulva to the womb.

Vesicles, Vessels, bags, or bladders.

Ventricle, Cavities in the brain—the lower, right and left cavities of the heart.

Vertebrated Animals, Those having a spine or skeleton.

Vermiform, Resembling a worm.

Villi, Delicate fibres on parts of the body, as on the lips, &c.

Villous, Pertainng to villi.

Virus, Polson, infectious excretion.

Viscus (Viscera, pl.), One of the viscera.

Vivi-Sectors, Those practising dissections on living animals.

Vulva, Aperture to the vagina.

Volltion, The will; the act of willing or determining by choice.

Voluntary Muscles, Those acting from the will.

Zoophyte, The class of organic beings partaking of both animal and vegetable life.

Zygomatic, Relating to the zygoma or cheek-bone.

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V. Vena cava descendens. R L, right lung. L L, left lung. H, heart. D. diaphragm. Livr., liver. Stm., stomach. C, colon, or large intestine, extending along each side, and across below the stomach, as seen in the figure. S. spleen, 1, 1, 1, small intestines.

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